2017 CAMP & CONFERENCE

REGISTRATION FORM

Christian Church (Disciples of Christ) in

Alabama-Northwest Florida

**(Online Registration/Payment Available at** [**www.alnwfldisciples.org/camp-information**](http://www.alnwfldisciples.org/camp-information) **)**

**PARTICIPANT'S INFORMATION – Please Print**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

“Preferred Name” \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: Male / Female

Age \_\_\_\_\_\_ Grade (just completed) \_\_\_\_\_\_\_\_\_\_

T Shirt Size \_\_\_\_\_

Birth Date \_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_

Church Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Camper’s Home Address:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #1 (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_

Phone #2 (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_

Parent's Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ***Genesis Camp (K/1st) – June 23-25***

 ***Discovery Camp (2nd/3rd) -June 23-25***

 ***Junior Camp (4th, 5th, 6th)-June 19-23***

 ***Chi Rho Camp (6th, 7th, 8th)-June 19-23***

***CYF Conference-June 19-23***

 **All Camps will begin and end at 10:00a.m.**

 **Camp Attending:**

 \_\_ Genesis Camp \_\_ Discovery Camp

 \_\_ Junior Camp \_\_ Chi Rho Camp

\_\_ CYF Conference

 **Registration Deadline: June 1st, 2017**

In order to help us have an idea of where you child may be for our planning, please indicate your child’s basic swim level. YMCA Camp Chandler will require a swim test for ALL campers desiring advanced swim privileges.

**\_\_ Can’t Swim \_\_\_ Beginner \_\_\_ Advanced**

 New Pricing Information for 2017 - Tiered Pricing

Tier #1 is Christian Church (DOC) in ALWNFL Summer Camp's historical rate. This rate is a heavily subsidized rate and does not reflect the full per-camper cost associated with providing summer camp programs.

Tier #2 is between the subsidized published camper rate and the full cost of providing a Christian Church (DOC) in ALWNFL summer camp program for each camper.

Tier #3 accounts for the full cost of providing a Christian Church (DOC) in ALWNFL summer camp program including the expenses of the volunteer counselors’ lodging, meals, and other expenses.

**Campers are encouraged to pay the rate that is possible based on your own circumstances. All campers receive the same camp experience, and the family’s decision is private and confidential. See Insert for More Information.**

Based on the new tiered pricing, I am included the following payment for camp fees:

Weekend Camps:

\_\_ Tier I ($150) \_\_Tier II ($175) \_\_Tier III ($200)

**Add $20 for Late Registration if After June 1st**

Full Week Camps:

\_\_ Tier I ($250) \_\_Tier II ($300) \_\_Tier III ($350)

**Add $30 for Late Registration if After June 1st**

*Refund policy can be reviewed at:* [*http://www.alnwfldisciples.org/camp-information/*](http://www.alnwfldisciples.org/camp-information/)

**Photography and Publicity Permission Form**

Every camp experience includes a group photograph which is given to all participants, used in a camp display, and posted on our website. Do you give permission for individual and small group pictures of your youth or child to be taken and posted on our website or used in publicity brochures and posters for future camps? If a choice is not marked, it will be assumed that your child’s photo CAN be used for publicity.

(Please Initial) Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_

**Please mail this form with your full payment by JUNE 1to**:

*CHRISTIAN CHURCH (DISCIPLES OF CHRIST)*

*IN ALABAMA-NORTHWEST FLORIDA*

*861 HIGHWAY 52*

*HELENA, AL 35080*

**2017 COVENANT for Campers**

***CHRISTIAN CHURCH (DISCIPLES OF CHRIST)***

***IN ALABAMA-NORTHWEST FLORIDA***

*Please read (or have read to you) the following. Sign this covenant, obtain parent signature and mail with completed camp registration form and appropriate fees. Thank you for your help!*

* I will come to camp expecting to grow in my faith and in relationship with others, becoming a special part of the camp community. In order to do this, I covenant to follow all the rules and guidelines set by the Christian Church in Alabama Northwest Florida and any others set for this event. With this, I commit myself to the following: To be on time, attend and be attentive for all camp/conference activities and participate in them fully
* Have fun and make sure everyone else has a great time
* To respect each other regardless of age and to respect others’ feelings and thoughts
* I will not go from adult to adult until I get the answer I want
* Be myself and open to making new friends
* Be inclusive at all times
* Cooperate with the counselors, keynoter, director and other staff members at all times
* Be respectful of God’s beauty in this special place and only leave footprints behind
* To take all that I learn about God and share it with my friends, family and church

***Summer Camping Program Policies***

• Participants are expected to remain for the entire event. No one should expect to arrive late or leave early without prior permission from director. The only visitors will be those invited prior to camp by the director.

• No one, including counselors, will leave the camp without special arrangements with the director.

• All cars will be parked for the duration of the event. Keys will remain in the possession of the director.

• Events for youth in Alabama-Northwest Florida are “smoke free”.

• Possession or use of intoxicating beverages, drugs or marijuana is prohibited. Violators will be sent home.

• Stewardship of camp property is important. Camp must be left in as good or better shape than it was found upon arrival. Repair of damage to property will be paid by the person(s) responsible.

• Food must be kept out of the dorm area. If you have special foods, arrangements can be made with director.

• Dorms are off limits to members of the opposite sex.

• Offensive, insensitive and foul language is not acceptable.

• Technology is not encouraged at camp. If you must bring it to camp, you agree to use it only as allowed by your director, and you assume all liability for your technology.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Camper/Conferee Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature

(MUST BE SIGNED REGARDLESS OF AGE)

**2017 MEDICAL INFORMATION AND RELEASE**

**Please answer with (yes or no):**

* \_\_\_\_\_\_ Do you have any health problems?
* \_\_\_\_\_\_ Are you currently under the care of a physician or psychologist?
* \_\_\_\_\_\_ Do you expect to have any difficulty with normal event activities?
* \_\_\_\_\_\_ Do you have any food or other allergies?
* \_\_\_\_\_\_ Do you take any prescription medication?

 ***(If “YES” To any******of the Above Questions, Please Explain Below or attach a separate letter describing the camper(s)’ health situation)***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Detail Any Special Medical or Other Concerns

 (if more room is needed, please attach a sheet to this form)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you allow appropriate over-the-counter

medications to be given as needed? \_\_ Yes \_\_\_ No

***SIGNATURE, AGREEMENT AND RELEASE:***

In case of emergency, I hereby give permission to the physician selected by the camp director to hospitalize, order injections, anesthesia or surgery for the child named above in order to secure necessary, proper medical care. I understand that I will be contacted immediately in the event that something unforeseen happens requiring my attention. I release the YMCA-Hargis Retreat staff and management, camp directors and counselors, and the Christian Church (Disciples of Christ) in Alabama-Northwest Florida and its staff, from all responsibilities in case of sickness or accidents causing injury occurring during camp. I have provided proof of insurance to those in charge.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian

(Signature required regardless of age of camper)

**Emergency Contact(s) Name & Phone Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Verification of Insurance:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Insurance Company, Address and Telephone Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Member Name Member ID

**THIS MEDICAL FORM MUST BE COMPLETED TO PROCESS YOUR REGISTRATION**

STATE OF ALABAMA )

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY )

**YMCA HOLD HARMLESS AGREEMENT**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, as the parent or guardian for

(Parent’s Name)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a minor child who is in my care and

(Child’s Name)

custody, do hereby grant my permission for my child to attend a program or event at YMCA Camp

Chandler. I fully understand the nature of camping and recreational activities associated with the

use of the camp facilities and/or programs includes an inherent risk of danger, which may result in

personal injury or harm to my child. I understand that my child will be under adult supervision at all

times but, notwithstanding any level or degree of supervision, that accidents may occur which may

result in physical injury or harm to my child. It is with the full understanding of the risks associated

with these types of activities that I grant permission for my child to participate in the program to be

conducted at YMCA Camp Chandler, and I agree to indemnify and hold harmless YMCA Camp

Chandler, the Montgomery Metro YMCA, its staff, directors, employees, agents and/or

representatives from any claim for any injury or damage which may result from my child’s

attendance and participation in the program conducted on camp property. Permission is granted

for my child to participate and I understand that by signing this form I am voluntarily and knowingly

accepting responsibility for my child’s participation in the activity or program to be conducted at

YMCA Camp Chandler. I also grant permission for pictures and images of my child to be taken

while participating in activities and used for YMCA promotional purposes.

Dated this \_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20 \_\_\_\_\_\_\_\_\_\_\_\_.

Parent’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_