



## 2017 Summer Camp

# CREATED

EPHESIANS 2:10

### Hey DMBA churches it's Summer Camp time again!!

We are excited to present as this year's theme: Created, You were created for a Purpose! Our scripture focus will be Ephesians 2:10 which says "For we are His workmanship, created in Christ Jesus for good works which God prepared beforehand that we should walk in them."

Enclosed you will find our registration forms to register your Church group for camp this year. You will see two forms one that is a Church Registration Form this form is to be filled out by you for your entire church group. This form must be mailed to us **no later than May 1, 2017**. Along with your Church Registration form you must include a non-refundable registration Fee of \$100 to secure your space in the cabins. This fee will be later deducted from your total amount due upon arrival at camp. All Church Registration Forms received after this date will be accommodated on a first come first served basis as space is available. So be sure to get your forms in on time!

The second form you will see is an Individual Student /Chaperone Form. This form is to be filled out by each individual attending camp. Important information such as t-shirt sizes, contact numbers, and allergy/medical info about each person will be on this form. And yes, all chaperones must complete this form. Please collect these forms and send them all together to the address provided below. These forms must be mailed and received **no later than June 1, 2017** so that T-shirts and food can be ordered. Any forms received after this date will not receive a T-shirt. Please send/bring one check from your church with everyone's fees together.

CHAPERONES: Your church is required to bring a Chaperone for each gender of students you have attending camp. If your church cannot provide a chaperone for each gender please contact us so that we can give you the names of other churches attending camp so that you can possibly combine your students with their chaperones. If however you cannot find one, one will be provided for you **but you must pay the full amount for that chaperone**. All chaperones must be at least 17 years of age for Children's Camp and at least 21 years of age for Youth Camp. Some chaperones will need to be available to help with programming, if you are willing to help please indicate your willingness on your registration form.

**Please send all registration forms to:** Sharon Westerfield, 3212 Winner's Circle, Owensboro, KY 42303

**Please make all checks payable to:** Daviess McLean Baptist Association (please include in the memo line Schafer Camp Registration Fees)

Camp Schafer Contact Information: Jason & Danielle Nichols (270)993-0463

## **What Should I bring to Camp?**

Bible and pencil or pen

Twin sized Bed linens or sleeping bag & a Pillow

Towels and wash cloths

Soap, shampoo, toothbrush & toothpaste

Flip Flops, Sandals, or Tennis Shoes (Shoes must be worn at all times )

Bug spray

Swim Suit, Towel & Sun tan lotion

Clothing to change once a day

Flashlight for nighttime activities



## **What CANNOT come to camp with me?**

Water Balloons

Shaving Cream

Water Guns

Knives of any kind (NO pocket or hunting knives)

Lighters or Matches

No alcohol or tobacco of any kind including smokeless tobacco

Students and Chaperones are responsible for their own items. The campground or camp directors are not responsible for stolen or lost items. Please do not leave any valuables unattended.

## Church Summer Camp Registration Form

Name of Church Registering: \_\_\_\_\_

Church Contact Information:

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Person's Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Our church is registering for:

\_\_\_\_\_ Youth Camp (entering 7th thru 12th grade)

\_\_\_\_\_ Number of Students Registering

\_\_\_\_\_ Number of Chaperones Registering

\_\_\_\_\_ Children's Camp (entering 2nd thru 6th grade)

\_\_\_\_\_ Number of Students Registering

\_\_\_\_\_ Number of Chaperones Registering

This form can be used to register for both camps on the same form. Please make sure your Registration Fee of \$100.00 is sent with this form to complete your Registration.

# **Individual Student/Chaperone Summer Camp Registration Form**

*Please circle the camp your child will be attending*

**Youth Camp July 3-7, 2017 Cost: \$185.00**

**Children's Camp July 10-13, 2017 Cost: \$155.00**

(entering 7<sup>th</sup> thru 12th Grade)

(entering 2<sup>nd</sup> thru 6th Grade)

Name of Student/ Chaperone: \_\_\_\_\_ Gender: M F Age \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

What church are you attending camp with \_\_\_\_\_

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

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**T-Shirt Size Please circle one: YS YM YL YXL AS AM AL AXL A2XL Other \_\_\_\_\_**

Family Physician; \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name of Primary Insurance: \_\_\_\_\_ Policy #: \_\_\_\_\_

Policy holder: \_\_\_\_\_

In case of an accident your church would be the secondary insurance provider.

My child does have the following limitations and medical conditions/allergies. They will bring their own medicine with them (list medications).

\_\_\_\_\_

\_\_\_\_\_

In consideration for your agreeing to accept the above individual as a camper, I hereby give my authority and consent for any first aid treatment as may be needed in the judgment of Schafer Baptist Camp Administration. In the case of an emergency, medical or surgical treatment can be given by physicians, nurses, etc. selected by Camp Director to hospitalize, secure proper treatment for, and to order injections, anesthesia or surgery for the above named child. I understand that limited secondary accident and illness coverage is provided.

I understand I will be contacted in the case of an emergency. In the event I cannot be contacted in an emergency camp personal may contact:

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ relation: \_\_\_\_\_

I, also, release the Daviess McLean Baptist Association, camp directors, camp pastors, camp counselors, and Camp Schafer staff from any liability or responsibility for accidents or incidents during camp.

I give my permission for my child's picture to used in Schafer Camp promotion material. Yes \_\_\_ No \_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\*\*\* Campers are responsible for their own articles \*\*\* Camp Fee Prices include two canteen items at each canteen