

CAMP KING JESUS-REGISTRATION & HEALTH FORM

CAMPER INFORMATION (Please Print)

Name: _____ Birth Date: ____/____/____ Grade: _____

Home Address: _____ City: _____ Sex: M or F

Father's Name: _____ Mother's Name: _____

Address if Different: _____ Address if Different: _____

Home Phone: _____ Cell: _____ Home Phone: _____ Cell: _____

List ANYONE who should NOT be permitted to pick up your Child from Camp: _____

ALLERGIES

Circle any that apply: Penicillin – Sulfa - Bee Sting - Wasp Sting - Other Insect Stings - Poison Ivy

List All Known Allergies:

Medications: _____

Foods: _____

List any special DIET NEEDS: _____

List any Medical Diagnosis: _____

Date of Last Tetanus: _____

Is your child covered by medical insurance: Yes or No

PLEASE ATTACH A COPY OF FRONT & BACK OF YOUR INURANCE CARD.

RESTRICTIONS OR OTHER HEALTH NEEDS

Please list any restrictions or additional information about your camper that camp representatives need to know

Regarding behaviors, and emotional, or mental health issues: _____

PLEASE TURN OVER AND COMPLETE BACK OF FORM.

OVER

MEDICATIONS

Please list All medications (include over-the-counter & prescription drugs) taken routinely. Bring All medication needed for camp in the original packaging/bottle. If the medication is a prescription make sure the container identifies the prescribing physician, the name of the medication, the dosage, the time or frequency of administration. Camp representative will not give ANY medication that is not provided by you for your child.

Med: _____ Reason for Taking: _____

Dosage: _____ Time to be Given: _____

Med: _____ Reason for Taking: _____

Dosage: _____ Time to be Given: _____

Med: _____ Reason for Taking: _____

Dosage: _____ Time to be Given: _____

Med: _____ Reason for Taking: _____

Dosage: _____ Time to be Given: _____

Med: _____ Reason for Taking: _____

Dosage: _____ Time to be Given: _____

Signatures:

Parent/Guardian Authorization: as far as I know and the person herein described has permission to engage in ALL camp activities except as noted. This Form is correct and complete

I hereby give permission to the camp to provide, seek and consent to routine health care, emergency treatment and administration of medications as listed above for me/my child, as may be necessary, including, but not limited to; x-rays, routine tests and treatment, and/or hospitalization. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes. (initial) _____

I hereby give permission to the camp to provide any necessary transportation. (initial) _____

Including transportation on the Ada/Minneapolis Parish Bus. (Initial) _____

I am requesting transportation for my camper to Camp King Jesus (Including to Mnpls Swimming Pool Sat. Night) (Initial) _____

I will pick up my camper in: (Please Circle) Ada Minneapolis Walk Home (Initial) _____

I hereby give permission to the camp to take pictures and release them to share with campers and/or media. (Initial) _____

It is my intention that the camp be treated as acting in *loco parentis* if the person herein named is a minor. Further, it is my intention that the appropriate representatives of the camp be treated as "personal representatives" for the purpose of disclosing protected health information pursuant to the privacy regulations promulgated pursuant to the Health Insurance Portability and Accountability Act of 1998. I hereby agree, pursuant to HIPPA, to the disclosure to camp representatives of the protected health information of the person hereby described as necessary; (i) to provide relevant information to the camp representatives related to the person's ability to participate in camp activities; and (ii) in the case of minors, to provide relevant information to the camp representatives to keep me informed of my child's health status.

I hereby give camp representatives permission to act in my behalf if I can not be reached in an emergency. (Initial) _____

Signature of parent/guardian or adult camper/staff: _____ Date: _____

Dated this _____ day of _____ 20 _____

Notary Public: _____

CAMP KING JESUS
ADA-MINNEAPOLIS BAPTIST CHURCH
CAMPER COMMITMENT FORM

NAME: _____

AGE: _____ Date of Birth: ____/____/____

GRADE in the FALL: _____

CAMP RULES:

1. Leave ALL electronic devices/toys at home;
(Cell Phones, Ipods, Ipads, MP3 Players, etc.)
2. Snacks will be provided. Please do not bring any.
3. Bring only books, literature or pictures suitable for a Christian Camp.
4. We reserve the right to check your bag for anything that might not be suitable for Camp.
5. I will willingly participate in ALL camp activities unless otherwise noted on my Registration Form.
6. I agree to the above rules and will honor God while at camp.

Camper's Signature-REQUIRED: _____

Please return this Camper Commitment Form signed with
Registration & Health Form signed and notarized to:
Tammy Schmidt or Rosie Prochaska.

SCHEDULE—Camp King Jesus Weekend (in Ada)

<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
3:30 Mpls. Check-in at MGS	7:45 Check-in/depart MGS	7:45 Check-in/depart MGS
4:00 Depart MGS Ada Check-in at community bldg.	8:00 Ada Check-in, comm.bldg.	8:00 Ada Check-in, comm.bldg.
4:30 Orientation starting at community bldg.	8:15 Flag-raising at comm.bldg.	8:15 Flag-raising at community building
5:15 Supper	8:30 Breakfast	8:30 Breakfast
6:00 Lesson for Life #1	9:15 Lesson for Life #2	9:15 Lesson for Life #5
7:00 Chapel service (mission offering)	10:00 K-2 Crafts 3-6 Recreation 7-12 Recreation	10:00 Prepare for Chapel
8:00 Campfire sing at parsonage, testimonies, and marshmallows	11:00 Cookie break	10:30 Cookie break
9:00 Depart from Ada church Ada pick-up at church	11:15 K-2 Recreation 3-6 Crafts 7-12 Recreation	10:45 Camp picture at church
9:20 Drop-off at MGS	12:15 Lunch	11:00 Chapel service
	1:15 Lesson for Life #3	12:00 Dinner
	2:00 K-2 Recreation 3-6 Crafts 7-12 Recreation	1:00 Depart with God
	3:00 Cookie break	1:20 Drop-off at MGS
	3:15 Lesson for Life #4	
	4:00 Volleyball, gaga ball, basketball, tether ball, bean bag toss, horseshoes, or hang out.	
	4:45 Supper	
	5:30 Chapel service	
	6:30 Leave church->Mpls. pool	
	7:00 Swim & snack (8:00)	
	8:45 Out of pool/load bus	
	9:00 Drop-off at MGS	
	9:30 Drop-off at Ada church	

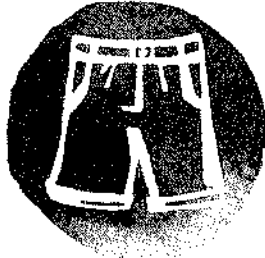
WHAT TO WEAR AT CAMP

Okay

Not Okay



Skirt



Walking Shorts



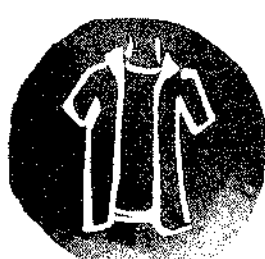
Pants



Polo Shirt



Jeans



Shirt over
T-Shirt



T-Shirt



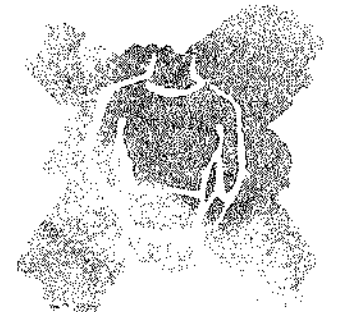
Short Shorts



Mini Skirts



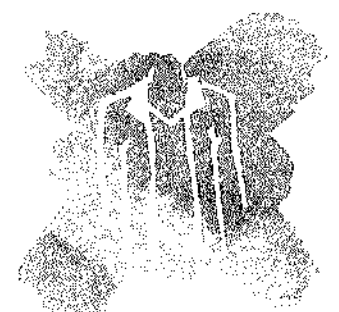
Tank Tops



Crop Tops



Sagging Pants



Shirt Over Cami



Muscle T-Shirt



Leggings

Modest One-piece Swimsuit or
Two-piece with Colored T-Shirt over it

Two-piece Swimsuit without a
Colored T-Shirt over it