

## **National Camping Ministries APPLICATION 2018**

### **BIG SHOTS Ages 6-9**

TWEENS Ages 10-12 /TEENS Ages 13-18 Date: Sunday August 26<sup>th</sup> - August 31st, 2018
COST: \$320.00 (includes Camp Fee, Transportation DATE: Friday July 27th- Sunday July 29th, 2018 COST: \$160.00 (includes Camp Fee, Transportation & Snack Card) & Snack Card)

> All forms & funds must be submitted to: Church of God of Prophecy - National Office 5145 Tomken Road, Mississauga, ON L4W 1P1 \*\*Credit Card payments are ACCEPTABLE\*\* \*\*Personal E-Transfers are UNACCEPTABLE\*\*

Deposit of \$80.00 for BIG SHOT Camp is due by June 29th, 2018 Balance must be submitted by July 9th, 2018 Deposit of \$150.00 for TWEENS/TEENS Camp is due by July 23rd, 2018 Balance must be submitted by August 13th, 2018

## LIMITED SPACES AVAILABLE!!! GET YOUR FORMS IN ASAP!!!

## ONE REGISTRATION FORM is REQUIRED FOR EACH CAMPER - \*\*PLEASE PRINT\*\*

Camper Name:	(First Name)			(Last Name)	
Camp (Big Shot or Tweens/Teens)		_Age:	Birthday:(dd/mm/yy)	/	
	Gender: M $\square$ F $\square$				
Home Phone:	Area Code:		Phone:		
Home Address:					
City:	Province:				
Postal Code:					
Parent Email:					
Campers Email:					
Father/ Guardian's			Work/Cell Phone:		
Mother/ Guardian's			Work/Cell Phone:		

## MEDICAL ALERT CHECKLIST

Health Card Number (REQUIRED):			
Date of last immunization: Tetanus	_ Measles zations are all up t	Mumps _ o date)	
Can Tylenol be given? Yes  No  ALLERGIES:			
On a separate sheet, please elaborate on physical were physical or emotional needs. Any diagnosed learning diseases? Are there any physical activities the campe medication that will need to be administered	g or attention difficul er should not participa	ties? Potentially ate in? <b>Is the c</b>	y communicable
Here are some topics that you may want to co Allergies, Asthma, Chicken Pox, Epilepsy, Red Measl German Measles, Fainting Spells, Sinus Trouble, Sle Toothaches, Hay Fever, Ear Infection, Frequent cold	les, Mumps, Hepatitis ep Walking, Bed Wett	ting, Rheumatic	e Fever,
Physician's Name:			
Phone Number:			
PAYMENT:	TOTAL C	CAMP FEE	\$
	DEPOSI	T AMOUNT	\$
	BALANC	CE DUE	\$
I have enclosed a deposit fee listed above. I understa will be <b>non-refundable.</b> Initials:		my child after t	the deposit has been paid,

The Camp balance MUST be received in the office BEFORE the date of arrival. No cash will be collected on camp site!

#### **Code of Conduct**

Guidelines for the good of campers and staff:

- 1. Smoking, gambling, drugs and alcohol are prohibited.
- 2. Do not bring electronic systems (i.e. radios, TV, etc.)
- **3.** Attendance is expected at all programmed activities.
- 4. Out of bounds: maintenance and staff areas, kitchen
- **5.** Do not leave campgrounds without prior arrangement with the camp director
- **6.** Curfew times are to be respected.
- Modest clothing and swimwear (one piece or Tshirt)
- **8.** Vandalism to the property will be charged to the camper.

# Registration Information Please read carefully:

- **1.** Ages refer to CALENDAR YEAR. Please apply ONLY FOR THE CAMP YOU ARE ELIGIBLE TO ATTEND. We will not accept any other applications.
- **2**. Parents or guardians should fill out the registration forms for younger campers. Please PRINT CLEARLY.
- **3.** We require the form to be filled out COMPLETELY and SIGNED. A parent/guardian's signature is required for all campers.
- 4. Registrations are accepted in the order they are received when accompanied by payment or acceptable alternative arrangements. One cheque is acceptable for several registrations. Make cheque/M.O. payable to Church of God of Prophecy. RE: Camp Olive Tree
- **5**. The deposit is **non-refundable**. That fee can **ONLY** be transferred to another camper.
- **6.** Items left behind at the site will be kept by Camping Director until claimed.
- 7. Transportation will be available as listed in the cost of camp. Should you decide to bring your child to camp, we will OMIT the cost of the transportation fee. (\$25.00).

## **Conditions of Registration**

- The acceptance by the camp directors of this application, and the signature of the parent or guardian on this
  application shall give the camp administration the right to obtain or approve any medical attention necessary for
  the applicant camper's welfare and good health and the parent or guardian hereby agrees to pay for all such
  services as may be required.
- 2. While every precaution shall be taken to ensure the good welfare and protection of the applicant camper; Church of God of Prophecy, its officers and staff members are hereby released from any and all liability in the event of any accident of misfortune that may occur to the applicant camper.
- 3. The members of the National Camping Ministry Team in consultation with the Camp Director, reserve the right to dismiss a camper who in his/her opinion is jeopardizing the safety and/or rights of others, or has rejected the reasonable controls of camp. Should this occur, it will be the sole responsibility of the parent and/or guardian to arrange appropriate transportation for the camper from the campsite.
- 4. Section 72(1) of the Child and Family Service Act places an expectation on the professionals to report a child in need of protection. Therefore, all camp staff who are professionally employed to provide a service to children MUST REPORT ALL DISCLOSURES OF ABUSE OR NEGLECT MADE TO HIM/HER BY A CAMPER.

**Signature(s) Required.** This registration form must be signed by the legal parent/guardian or the form will <u>not</u> be accepted.

Parent/Guardian \_\_\_\_\_\_ Date:\_\_\_\_\_\_ Signature

I have read and agree to the conditions of registration and the code of conduct.

Office use only	
Office use only Date rec'd:	
Amount Paid	
Signature:	