

SEIZE THE DAY

"Obey the Word of God. If you hear only and do not act, you are only fooling yourself"

This will be the motto of Youth Week '16. This will be a high octane week full of friendship, worship and encouragement as students will be lovingly challenged to step outside their comfort zone into the arena of faith that God calls us too. This will not be a wild 180 degree turn away from the Youth Week we all know and love; but it will be a call for students to take their witness seriously. We live in a community that needs Jesus, and it is our privilege to reflect his love to those around us.

During our time at camp, we will be engaging in a study of the book of James, in which we will learn the importance of an active faith. The hope is that this group-oriented theme will lead our community of young students into a "kingdom-mindset", and encourage them to be looking for ways to speak the Gospel into the lives of friends, family and others they come across.

We will spend our time from Sunday (August 28) until Thursday (September 1) at Upper Canada Camp, studying together, applying scripture, and of course taking part in the fun and exciting aspects of camp life! On Thursday we will be returning to Brampton, with an eye towards meeting on Friday (September 2) as a way of finding ways for our group to be engaged in our community.

DAILY SCHEDULE	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:30		Breakfast	Breakfast	Breakfast	Breakfast	
9:00		Morning Game	Morning Game	Morning Game	Morning Game	
10:00						Outreach Vision
11:00		Chapel 2	Chapel 3	Chapel 4	Chapel 5	
12:00		Lunch	Lunch	Lunch	Return to BBC	Lunch
1:00		Quiet Time	Quiet Time	Quiet Time	Lunch @ BBC	Free Time
2:00		Tuck	Tuck	Tuck		
3:00	Check-In					Community Project
4:00	Team Building	Free Time	Free Time	Free Time		
5:00	Dinner	Dinner	Dinner	Dinner		Dinner
6:00	Free Time	Free Time	Free Time	Free Time		Wide Game
7:00						
8:00	Chapel 1	Wide Game	Wide Game	Wide Game		Concert
9:00	Group Reflection	Group Reflection	Group Reflection	Group Reflection		Wrap-Up
10:00	Snack	Snack	Snack	Snack		
11:00	Head to Cabins	Head to Cabins	Head to Cabins	Head to Cabins		
11:45	Lights Out	Lights Out	Lights Out	Lights Out		

BBC YOUTH WEEK REGISTRATION

SEIZE THE DAY

August 28 - September 2, 2016

ALL INFORMATION MUST BE COMPLETED BEFORE REGISTRATION

PLEASE PRINT (except for signatures)

CAMPER INFO

Camper's First Name: _____ Last Name: _____ ☐ M ☐ F

Birth Date: ____/____/____ Grade (Fall 2016) 8 9 10 11 12 G T-Shirt Size: S M L XL XXL
D M Y

Address: _____ City: _____ Postal Code: _____

Mother/Female Guardian: _____ Father/Male Guardian: _____

Mother's Home Phone: (____) _____ Work: (____) _____ Cell: (____) _____

Father's Home Phone: (____) _____ Work: (____) _____ Cell: (____) _____

Primary Caregiver's Email Address (give one only): _____

Camper lives with ☐ Both Parents ☐ Mother ☐ Father ☐ Other: _____

Alternate Emergency Contact Name: _____ Relationship to camper: _____

Home Phone: (____) _____ Work: (____) _____ Cell: (____) _____

Tax receipt to be issued in name of: _____

Do you attend Bramalea Baptist Church? ☐ Yes ☐ No If no, which church do you attend? _____

A \$100 deposit is required for registration.

Deadline for full payment: July 31, 2016 Cost: \$275 Family discount rate - deduct \$50 of 2+ registration

***\$250 If received prior to July 1, 2016**

PAYMENT OPTIONS: ☐ Cash ☐ Cheque ☐ Debit ☐ Visa ☐ MasterCard

Submit payment by **cheque** payable to Bramalea Baptist Church or **debit** (in church office only)

If paying by **credit card**, please complete information below:

Card Number: _____ Expiry: _____

I hereby authorize the above-noted payment to be processed by the credit card and number provided.

Cardholder Name

Cardholder Signature

Date

☐ **\$100 deposit**

☐ **\$250 Early**

☐ **\$275 Regular**

FOR OFFICE USE ONLY

Date Received: _____

Registrations and payment can be emailed to Jeannie @ jboisvenue@bramalea.org
faxed (905) 451-0072 or dropped off at the church office during office hours. Thanks!

Continued on reverse

MEDICAL

Camper's First Name: _____ Last Name: _____

Ontario Health Card #: _____ Height _____ ft. _____ in. Weight _____ lbs.

Last Tetanus Shot: ____/____/____ Last Immunization Date: ____/____/____ Immunization details: _____
M D Y M D Y

1. Are there any health issues, emotional or behavioural conditions we should be aware of? ☐ Yes ☐ No If yes, please explain:

2. Does the camper have any allergies (including drugs and food)? ☐ Yes ☐ No If yes, please explain: _____

3. If yes to allergies, do parents agree to provide an epi-pen to be packed with the camper? ☐ Yes ☐ No

List special health-related diet requests: _____

4. Is the camper currently receiving medication of any kind? ☐ Yes ☐ No If yes, please list medications and explanations:

5. In your opinion, is the camper physically and emotionally fit to participate in the rigorous activities of camp life? ☐ Yes ☐ No

6. Name of family doctor: _____ Phone: (____) _____

The camp provides first aid on the camp grounds during the camp session. The parent or guardian is responsible to provide adequate medical coverage for the camper.

CAMPER CONDUCT AGREEMENT - Please read carefully

I agree that it is a privilege to attend camp. To honour that privilege, I will abide by the guidelines set by the leadership of Bramalea Baptist Church concerning attendance, curfew, my attitude, my participation in activities, respect towards camp leadership, respect towards fellow campers, and respect for camp property. I understand that Upper Canada Camp is a **NO Smoking** facility and agree that I will not bring cigarettes, alcohol, non prescription drugs or weapons of any kind. I further acknowledge that all living quarters for females are off limits to males and all living quarters for males are off limits to females at all times. I realize that my failure to be co-operative in these and other areas could result in my being sent home at my own or parents' expense. Leaving the camp property without approval by camp staff will result in an automatic dismissal from camp. The cost to repair any damage to the camp property will be paid by the parent or legal guardian.

CONDITIONS OF REGISTRATION - Please read carefully

1. The parent or legal guardian submitting this registration must have legal custody of the above camper. Conditions of custody, if applicable, will be fully communicated in writing to the Camp Director/Youth Pastor. Release of a camper will only be to the registering parent or legal guardian.
2. I give permission for the above camper to attend camp and to participate in activities.
3. I give permission for photo or videos of the above camper to be used for camp promotional purposes.
4. While every precaution shall be taken to ensure the good welfare and protection of the camper, Bramalea Baptist Church and its designated representatives are hereby released from any and all liability in the event of any accident or misfortune that may occur to the camper. Each camper must be covered by Ontario Health Card or equivalent insurance (please bring valid card). In case of emergency, every effort will be made to contact me. I will provide a phone number where I can be reached at all times.
5. Permission is given to provide normal medical attention. In the event a camper requires special medication, x-rays or treatment beyond that which is possible at the camp, the parents will be notified immediately and will be charged with the additional expense of transportation and special care. In case of emergency, surgical emergency or a required treatment by a registered doctor, I hereby give permission to the physician selected by the leadership of Bramalea Baptist to hospitalize, secure proper treatment for, and to order injections, anaesthesia or surgery for my camper as name on this registration form.
6. The Camp Director reserves the right to dismiss a camper who, in his / her opinion, is a hazard to the safety or rights of others, who refuses to participate in the designed program, or who appears to have rejected the reasonable expectations of the camp. Refund of camp fees will not be provided for campers expelled due to disciplinary action.

I have read the camp information and registration form, I have provided true and accurate information. By signing this registration form, the camper and I, the parent or legal guardian, agree to the above terms defined by the Camper Conduct Agreement and the Conditions of Registration.

This registration form will not be accepted without both the camper and parent or legal guardian's signatures.

Camper's Signature: _____ Parent or Legal Guardian's Signature: _____

Camper's email address: _____ Date: _____