

2010 SJBA Youth CAMP – June 14 - 18

Camper Application Form

Please complete all pages of this form & Sign all *indicated places

COST: \$95 per camper

YOUTH CAMP IS FOR THOSE WHO HAVE COMPLETED 7TH -12TH GRADES

NAME _____ []MALE []FEMALE

AGE _____ SCHOOL GRADE COMPLETED _____ BIRTHDATE _____

ADDRESS _____ PHONE _____

CITY/STATE/ZIP _____

ARE YOU A CHRISTIAN? []YES []NO

ARE YOU A CHURCH MEMBER? []YES []NO

CHURCH YOU ATTEND: _____

CITY: _____

Grade levels WILL be grouped together: IF POSSIBLE I WOULD LIKE TO BUNK WITH:

1. _____

I NEED A T-SHIRT IN SIZE (please check ADULT size needed)

Small Medium Large X - Large XX-Large

***BOTH - CAMPER & PARENT or GUARDIAN READ AND SIGN BELOW:**

I understand that youth camp begins on Monday, June 14th at 10:00 AM and ends Friday, June 18th at 11:00 AM. Campers are registered with the understanding that they will be at camp the entire time.

I have read and understand all the rules and agree to follow them. If I break the rules I understand that my parents will be called and this can result in my removal from camp.

*Camper signature _____ Date _____

*Parent or Guardian signature _____ Date _____

Notice of Privacy Policy and Practices for Camper Medical Information

Purpose of this Notice

Saint Joseph Baptist Association respects the privacy of personal information and understands the importance of keeping this information confidential and secure. This Notice describes how we protect the confidentiality of the personal information we receive.

How We Protect Personal Information

We treat personal information securely and confidentially. We limit access to personal information to only those persons who need to know that information to provide services to our campers. We are required to place a copy of each camper's medical information on file with Grand Oaks Baptist Assembly.

Disclosure of Personal Information

We may disclose this information to non-affiliated entities or individuals as permitted by law. Non-affiliates with whom we may disclose information as permitted by law include our attorneys, our insurance carrier, healthcare providers, third party administrators and law enforcement. Both the Saint Joseph Baptist Association and Grand Oaks Baptist Assembly are required, as a matter of law, to hold this information in storage for an indefinite period of time.

Further Information

If you have any questions about this notice, please contact the Saint Joseph Baptist Association at 4608 Mitchell Avenue Saint Joseph, MO 64507.

I have read the Privacy Policy of the Saint Joseph Baptist Association.

***Parent or Guardian Signature** _____ **Date** _____



Appearance Clause

I understand Saint Joseph Baptist Association from time to time produces promotional material about its events. I understand that my child may be included in video or photographs taken at the youth events. I hereby grant Saint Joseph Baptist Association the right to photograph and/or video tape my child and further utilize participant's name, face likeness, voice and appearance as part of the event and in advertising and promoting the event, without reservation or limitation. In granting this license, I understand that Saint Joseph Baptist Association is under no obligation to exercise any of its rights, license and privileges herein granted by participant.

Furthermore the Saint Joseph Baptist Association is not responsible for pictures taken by individuals that attend Saint Joseph Baptist Association sponsored events.

I have read the Appearance Clause and sign in agreement.

***Parent or Guardian Signature** _____ **Date** _____

Completed Form Due in Mission Center by May 11

2010 Camper Registration Health Form

NAME _____ BIRTHDATE _____

PARENT/GUARDIAN _____ HOME PHONE _____

ADDRESS _____ WORK PHONE _____

CITY/ST/ZIP _____ OTHER PHONE _____

CONTACT PERSON OTHER THAN ABOVE _____

ADDRESS _____ HOME PHONE _____

CITY/ST/ZIP _____ WORK PHONE _____

FAMILY PHYSICIAN _____ PHONE _____

CHECK AND COMMENT ON ALL THAT APPLY:

ALLERGIES:

- | | | | | |
|---------------------------------------|---|---|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Penicillin | <input type="checkbox"/> Bee/Insect Sting | <input type="checkbox"/> Sulfa/other drugs | <input type="checkbox"/> Poison Ivy | <input type="checkbox"/> None known |
| <input type="checkbox"/> Tetanus Shot | <input type="checkbox"/> Hay Fever | <input type="checkbox"/> Other (list) _____ | | |

HAS HISTORY OF/UNDER MEDICAL CARE FOR:

- | | | | | |
|--|--|---|---------------------------------|---|
| <input type="checkbox"/> Heart Trouble | <input type="checkbox"/> Tonsillitis | <input type="checkbox"/> Skin Disorders | <input type="checkbox"/> Asthma | <input type="checkbox"/> Epilepsy |
| <input type="checkbox"/> Appendicitis | <input type="checkbox"/> Bronchitis | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Hernia | <input type="checkbox"/> Nervous Disorder |
| <input type="checkbox"/> Athletes Foot | <input type="checkbox"/> Stomach Ulcer | <input type="checkbox"/> Other _____ | | |

SUBJECT TO:

- | | | | | |
|---|--|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Homesickness | <input type="checkbox"/> Cramps | <input type="checkbox"/> Convulsions | <input type="checkbox"/> Sleepwalking | <input type="checkbox"/> Sore Throat |
| <input type="checkbox"/> Headaches | <input type="checkbox"/> Bedwetting | <input type="checkbox"/> Nosebleeds | <input type="checkbox"/> Earaches | <input type="checkbox"/> Hyperactivity |
| <input type="checkbox"/> Fainting | <input type="checkbox"/> Toothaches | <input type="checkbox"/> Exhaustion | <input type="checkbox"/> Swimmer Ear | <input type="checkbox"/> Cold/Pneumonia |
| <input type="checkbox"/> Other (list below) | <input type="checkbox"/> Stomach/Digestive Disorders | | | |

CHECK OR LIST ANY ACTIVITIES CAMPER SHOULD NOT PARTICIPATE IN:

- | | |
|--|--|
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Strenuous Games |
| <input type="checkbox"/> Should Not Use Upper Bunk Bed | <input type="checkbox"/> Other: _____ |

MEDICATIONS REQUIRED WHILE AWAY FROM HOME:

Name of Medication: _____ For: _____

Instructions: _____

Any medications that should not be given?(ASPIRIN, COUGH DROPS, ETC.) _____

ALL MEDICATIONS SHOULD BE CHECKED IN WITH THE CAMP NURSE IN THE ORIGINAL CONTAINER.

DATE OF LAST TETANUS SHOT _____

INSURANCE INFORMATION:

Is the participant covered by family medical/hospital insurance? YES NO

If so, please indicate carrier or plan name _____

Group # _____ Social Security # of policy holder/insurance ID Number _____

Name of Insured _____

MEDICAL RELEASE

I (We) have provided complete and accurate information about this camper/myself and understand that, in the event medical treatment is required, every effort will be made to contact me (us) or the other person named above. However, if I (we) cannot be reached I (we) give permission to the staff or sponsors to secure the medical services deemed necessary to provide for this campers' well being. I (We) also understand that the insurance provided by Grand Oaks Baptist Assembly, Inc. is a limited supplemental policy covering injury or accidents occurring during the event at Grand Oaks. Even then it will be used only to supplement the family insurance.

*Parent or Guardian _____ Date ____/____/____

*Parent or Guardian _____ Date ____/____/____

Guidelines for Campers and Coaches

The St. Joseph Baptist Association Camp at Grand Oaks is for spiritual enrichment of our young people. It is our desire to help each student develop higher spiritual standards. For this reason, we feel that the following guidelines are necessary to maintain this standard and provide for the safety of each camper.

Clothing

1. Proper attire for daytime is full t-shirts and jeans or shorts. No sleeveless shirts are allowed.
2. Necklines may come no lower than four fingers below the collarbone.
3. Shirt hems should extend well below the waist of pants and shorts. If a student raises their arms above their head and midriff shows, the shirt is not long enough.
4. Shorts must extend to or below the student's fingertips when their arms are held to their sides.
5. Clothing with questionable slogans and/or advertisements will not be permitted.
6. Two piece swimsuits are not acceptable. One piece suits must be approved at the pool. A dark shirt may be worn in the pool over an inappropriate suit. Speedos, spandex suits, or cut-off jeans are not acceptable as swimwear.
7. Tennis shoes are required.
8. Shirts will be worn by all when going to and from the pool.
9. Boys will wear cover when going to and from the shower house.

Attendance

1. Campers must check in with their coach at meal times, before evening worship and late night activities.
2. Be prompt.
3. Participate in all activities.

Attitude

1. Camp is a group activity. Let's work together as a group.
2. Show Christian spirit at all times. If you have a problem, take it to your coach or the camp director.

Action

1. Campers are not to leave the cabin after lights out, or leave the campgrounds at anytime without the consent of the camp director.
2. Name tags will be worn during activities unless directed otherwise.
3. All sickness should be reported to the camp nurse.
3. No public displays of affection are allowed.
4. Obey all posted rules, lifeguards and coaches at the swimming pool.
5. Keep rooms clean at all times -- leave camp in better shape for the next group.
6. Tobacco or alcohol in any form, will not be a part of the camp program.
7. No fireworks.
8. No radios, CD, MP3, IPOD or tape players.
9. No cell phones, pagers, or walkie talkies, please! All these items should be left at home. If brought they should be given to staff for safekeeping.
10. No shaving cream except for shaving purposes.
11. All medicines must be in the original container and delivered to the nurse!
12. Please obey all authority figures.

Failure to comply with any of the above rules can result in your parents being called to camp to take you home.

THE CAMP DIRECTOR WILL HAVE THE FINAL DECISION IN INTERPRETING THE ABOVE GUIDELINES.

Equipment & Clothing List on Back →

CLOTHING AND EQUIPMENT NEEDED FOR CAMP

CLOTHING FOR GIRLS: (see guidelines for further direction)

Full shirts and/or blouses (no sleeveless shirts); Jeans, slacks, capris and shorts (appropriate-see guidelines); one piece swimming suit (appropriate) ; Tennis shoes are required; Raincoat; Sweater or jacket.

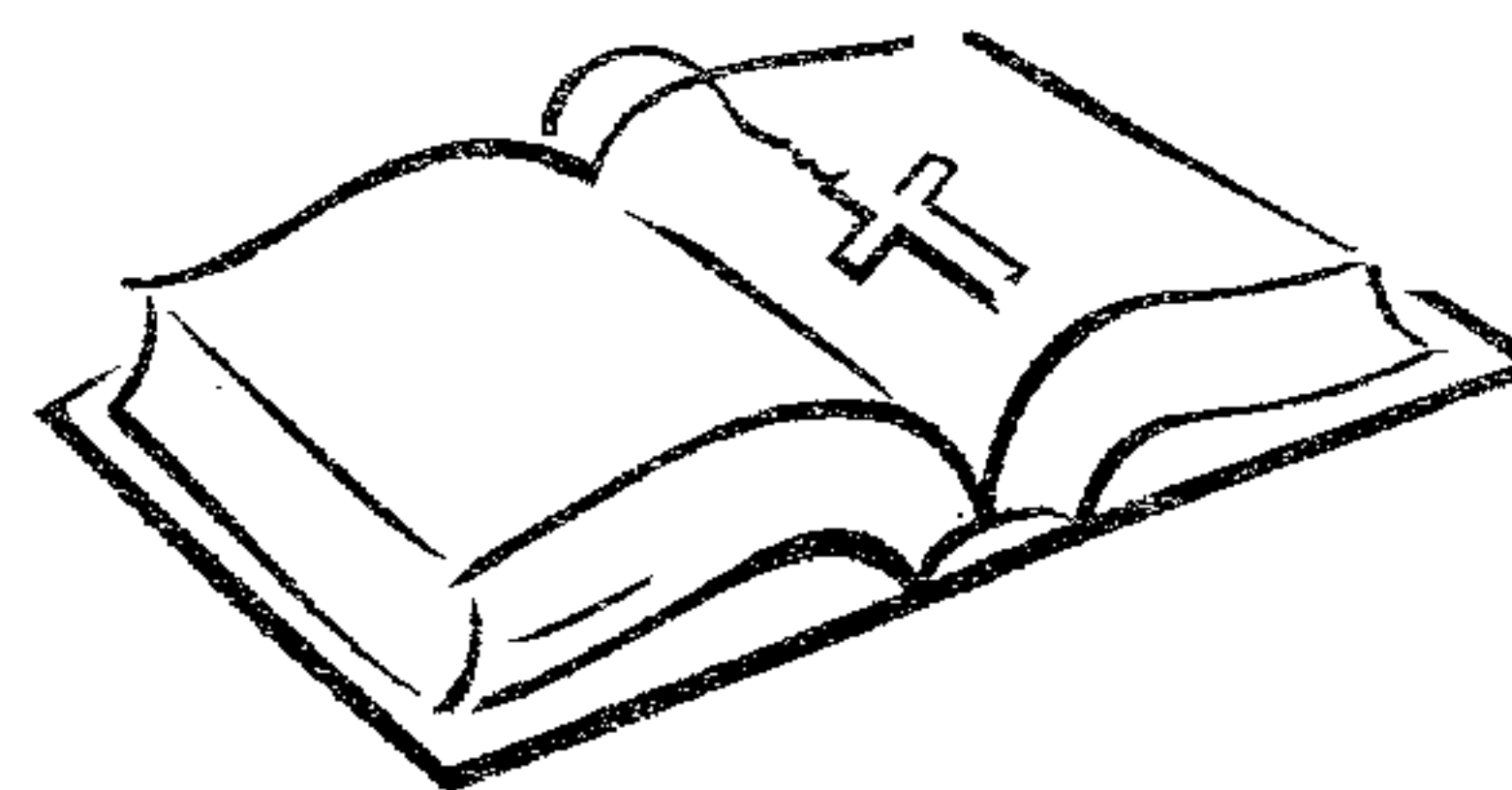
CLOTHING FOR BOYS: (see guidelines for further direction)

Jeans, slacks and shorts; T-shirts and/or sport shirts (no sleeveless shirts); Sweater or jacket; Changes of underwear; Tennis shoes are required; Raincoat; Swimming trunks.

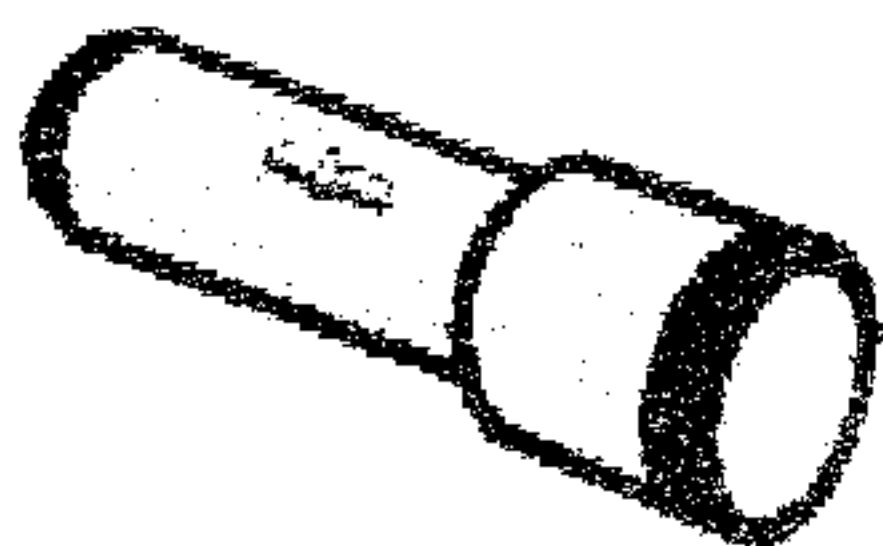
CLOTHING SHOULD BE COMFORTABLE AND CASUAL BUT MODEST

MISCELLANEOUS

Bible, notebook, pen or pencil
Towels (extra for swimming) and washcloths
Pillows
Sleeping Bag or Blanket and two sheets
Toilet articles (soap, comb, toothbrush, toothpaste, deodorant etc.)
Flashlight
Camera (if you desire)
Several clothes hangers
Insect repellent
Suntan lotion
Prescription medicines in original container (Must be dispensed by the nurse)



**ALL ITEMS BROUGHT TO CAMP SHOULD BE MARKED
WITH THE CAMPERS NAME**

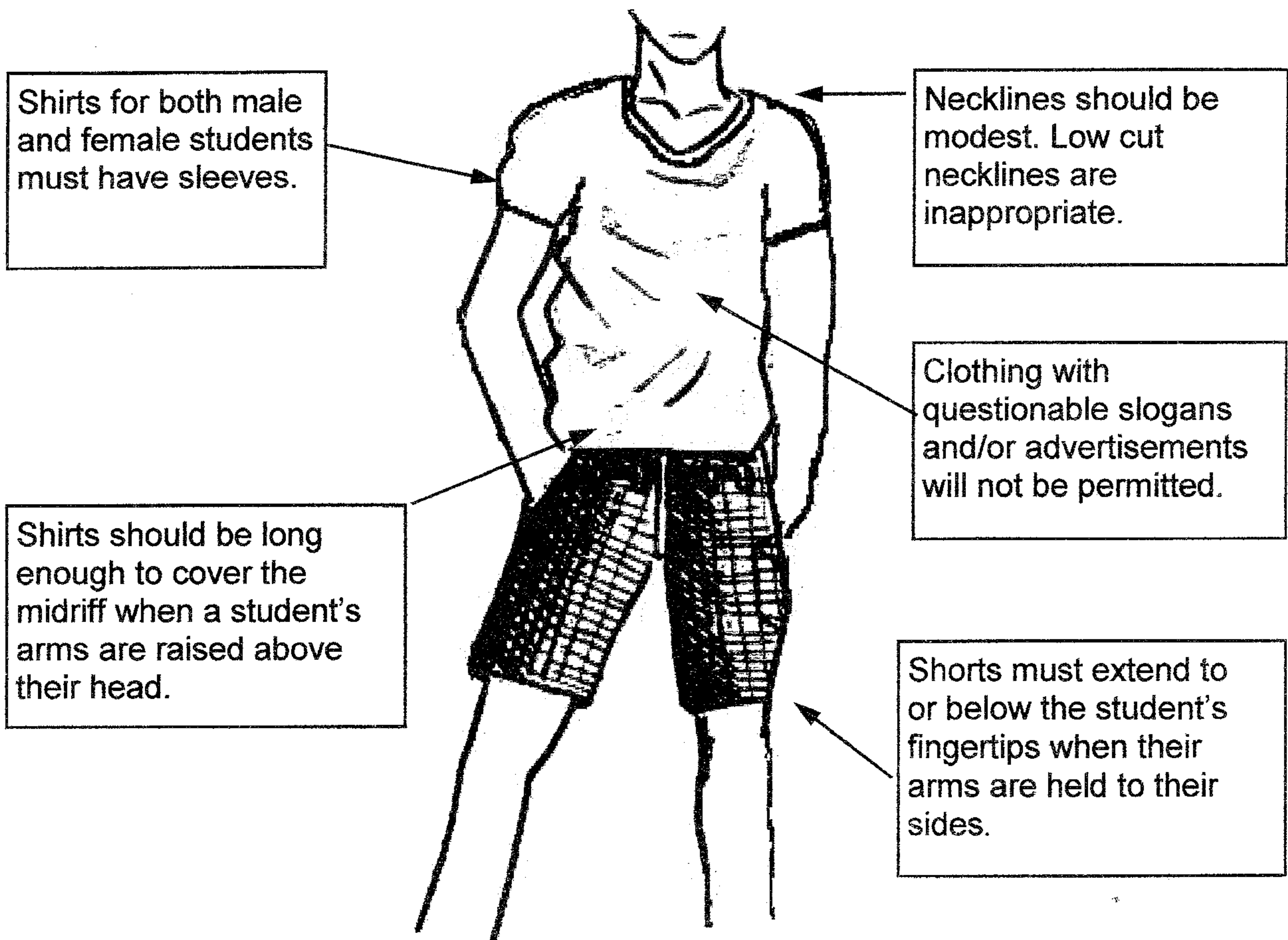


**Mailing Address for Camp:
Grand Oaks Baptist Assembly
9463 Hwy 190
Chillicothe, MO 64601**

Guidelines for Coaches & Campers on Back →

DRESS CODE GUIDE

Clothing should be comfortable and casual but modest. The standard dress for camp this year is full t-shirts and shorts. Dress clothes are **not** required for chapel. Please consult this guide and other written guidelines in the camp registration materials.



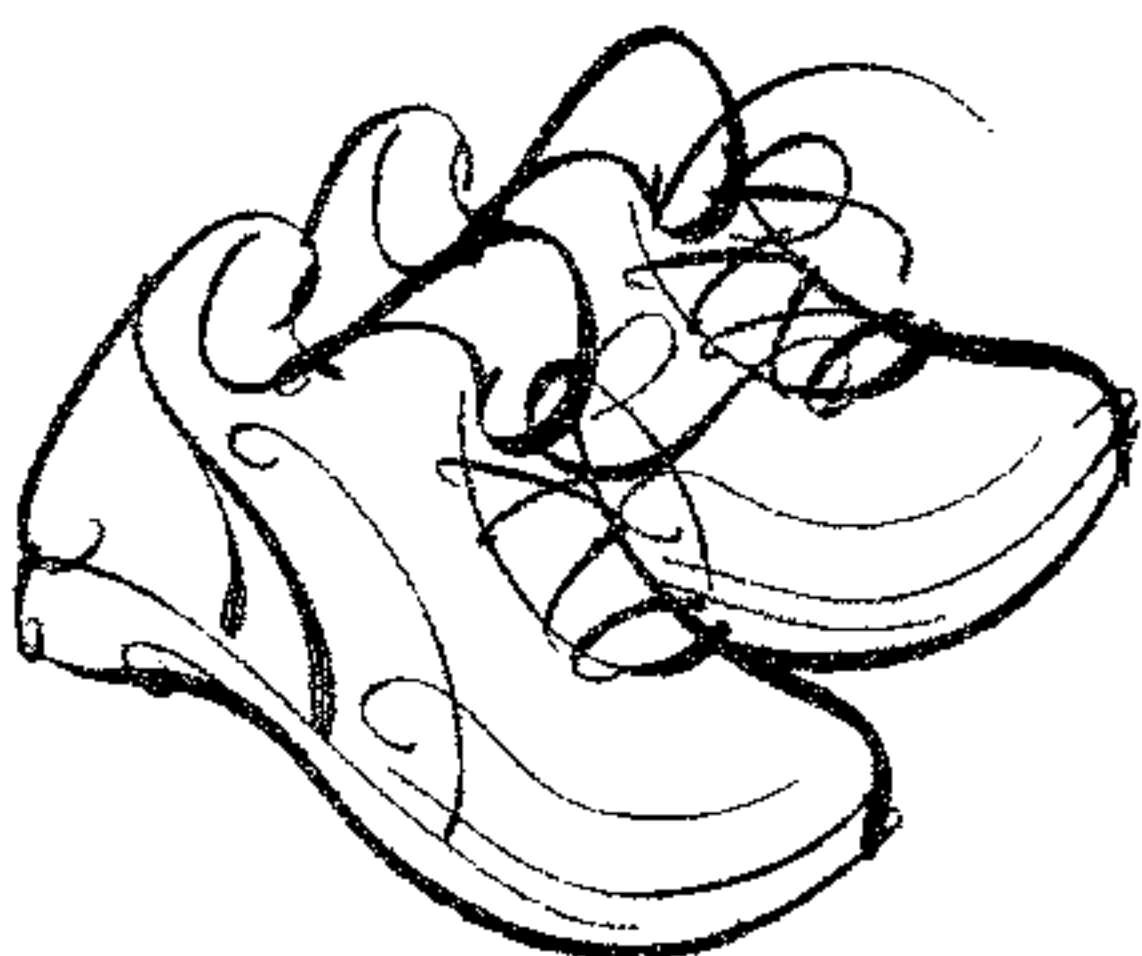
Shirts should be long enough to cover the midriff when a student's arms are raised above their head.

Necklines should be modest. Low cut necklines are inappropriate.

Clothing with questionable slogans and/or advertisements will not be permitted.

Shorts must extend to or below the student's fingertips when their arms are held to their sides.

Shoes must be worn at all times. Tennis shoes are preferred and required for recreation.



SWIMWEAR

Two piece swimsuits are not acceptable. One piece suits must be approved at the pool.

Shirts must be worn by all travelling to and from the pool. A **dark** shirt **must** be worn in the pool over an inappropriate suit.

Speedos, spandex suits, or cut-off jeans are not acceptable as swimwear.