

Southwest Oregon Baptist Association Camps

FIR POINT BIBLE CONFERENCE GROUNDS

PHONE (541) 832-2202

CAMP: YOUTH CAMP AUGUST 8-12, 2011 \$100.00 Male Female
 CHILDREN'S CAMP AUGUST 15-19, 2011 \$100.00 Male Female
 Counselor (\$35) Non-Camper (\$35) Children Mission's Offering \$ _____

NAME _____ AGE _____ GRADE COMPLETED _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____

IN CASE OF EMERGENCY NOTIFY _____ PHONE (____) _____

YOUR CHURCH _____ PASTOR _____ PHONE _____

ARE PARENTS CHURCH MEMBERS? MOTHER FATHER

HAS YOUR CHILD EVER ATTENDED CAMP BEFORE? YES NO CHRISTIAN YES NO

WILL YOU ALLOW YOUR CHILD TO SWIM IN THE CAMP POOL? YES NO

DOES YOUR CHILD HAVE ANY PHYSICAL LIMITATIONS THAT MIGHT PREVENT HIS/HER PARTICI-
 PATION IN RECREATIONAL ACTIVITIES? YES NO IF YES, PLEASE EXPLAIN ON BACK.

DOES YOUR CHILD HAVE ANY SPECIAL NEEDS OR PERSONALITY TRAITS? _____

MY CAMPER HAS PERMISSION TO HAVE PHOTOS TAKEN FOR PUBLIC RELATIONS (CAMP PROMOTION) YES NO

ARE THERE RESTRICTED VISITORS TO YOUR CHILD AT CAMP? YES NO

IF YES PLEASE LIST THE NAMES ON THE BACK OF THE FORM. RESTRAINING ORDER? YES NO

WHO MAY PICK UP YOUR CHILD (EITHER AFTER CAMP OR AT CAMP)? _____

IN THE EVENT THE CAMPER IS RELEASED DUE TO DISCIPLINARY ACTIONS, I AGREE TO HAVE ARRANGEMENTS MADE TO TRANSPORT THE CAMPER HOME WITHIN THREE HOURS OF BEING NOTIFIED. I FURTHER AGREE TO BE RESPONSIBLE FOR ANY INCURRED EXPENSES (I.E. TRANSPORTATION EXPENSES). I AGREE THAT MY CHILD WILL PARTICIAPTE IN ALL ACTIVITES OF THE CAMP UNLESS PHYSICALLY OR MENTALLY UNABLE TO PARTICIPATE AS NOTED ON THIS FORM. I HAVE RECEIVED A COPY OF THE ITEMS THAT MY CHILD SHOULD BRING TO CAMP (PAGE THREE OF THIS FORM).

SIGNATURE OF PARENT OR GUARDIAN **X** _____

BUSINESS ADDRESS _____ BUSINESS PHONE _____

HOME PHONE _____

NAME OF PERSON TO CONTACT SHOULD WE BE UNABLE TO REACH YOU IN CASE OF EMERGENCY:

BUSINESS PHONE _____ HOME PHONE _____

SOUTH WEST OREGON BAPTIST CAMP IS DULY AUTHORIZED MINISTRY OF THE SOUTH WEST OREGON BAPTIST ASSOCIATION.

FEE RECEIVED	\$	DATE RECEIVED		Kitchen Worker <input type="checkbox"/>	Non-Camper (Child) <input type="checkbox"/>
CANTEEN	\$	SIGNATURES CHECKED		Counselor <input type="checkbox"/>	Other (Nurse, Etc.) <input type="checkbox"/>
MISSION OFFERING	\$	RELEASE OK		Other Notes:	
TOTAL	\$	MEDICAL HISTORY			

SPONSORING CHURCH: _____

(Please Do not print on the back of this form)

MEDICAL/PERMISSION AND RELEASE FORM

NAME _____ AGE _____ GRADE COMPLETED _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
IN CASE OF EMERGENCY NOTIFY _____ PHONE (____) _____
CHURCH _____ PASTOR _____ PHONE _____
FAMILY PHYSICIAN _____ PHONE _____
FAMILY INSURANCE COMPANY _____ POLICY # _____
OTHER: _____

PAST ILLNESSES & MEDICAL HISTORY

- Asthma Sinusitis Bronchitis Kidney trouble Diabetes ADHD
Heart trouble Dizziness Stomach upset Hay fever Other

(List Other) _____
ALLERGIES: Food _____

Penicillin or other drug (name) _____

Insect stings/bites _____ EPI PEN?

Poison sumac, oak, or ivy _____

Previous operations or serious illnesses _____

Any current medications (list): _____

Special diet (name): _____

Childhood diseases: Chicken pox Measles Mumps Whooping Cough

Other (list): _____

NOTE: If your child is on medication, please have him/her leave it with our CAMP NURSE with a detailed note of dosage schedule. ONLY THE CAMP NURSE MAY ADMINISTER ANY OR ALL MEDICATIONS DURING CAMP AS REQUIRED BY OREGON STATE LAW! PLEASE WRITE ANY SPECIAL INSTRUCTIONS FOR THE CAMP NURSE ON THE BACK OF THIS FORM.

PERMISSION FOR TREATMENT

My permission is granted for the Camp Director, Assistant Director, or other staff person in charge to obtain necessary medical attention in case of sickness or injury to my child.

I, the undersigned, do hereby verify that the above information is correct and I do hereby release and forever discharge all sponsors, Southwest Oregon Baptist Association and the _____ Church from any and all claims, demands, actions or cause of action, past, present, or future arising out of any damage or injury while employed by or participating in camp.

Dated this _____ day of _____, 2011.

State of _____ County of _____

Signature X _____

Relationship to Camper _____

Witnessed by (Signature) X _____

Address _____

SPONSORING CHURCH: _____

WHAT SHOULD I BRING TO CAMP?

Plan to bring the following items with you:

- **Bible, notebook, pen or pencil**
- **Personal articles such as toothbrush, shampoo, deodorant, towels, washcloths, soap, etc.**
- **Appropriate clothing. You are coming to a great Christian camp. Your clothing should reflect a Christian example. Shorts are acceptable for Bible study, recreation, fellowships, and worship. If worn to worship, shorts should be modest, clean, and neat. Skirts and dresses are acceptable in worship. Jeans are always acceptable. Backless or halter dresses and are not acceptable at any time. Modest one-piece swim suits are allowed. No bikini, French cut, or even one-piece resembling two-piece suits can be worn. Immodest shorts or tops, distasteful artwork or messages or other extreme clothing are not acceptable. Pajamas or other sleeping attire is inappropriate for daytime wear outside of the cabins. Underwear-type clothing must be covered at all times. Keep in mind it may be cold at night. Camp leadership reserves the right to approve clothing.**
- **Comfortable shoes for hiking and playing outdoors.**
- **Bedding or sleeping bag (bring your own pillow)**
- **A flashlight (two cell preferred)**
- **During children's camp all canteen fees are included in the camp fee. Your child will be restricted to \$1.25 in purchases from the canteen. Please don't send your child to camp with a supply of candy! We encourage campers to eat meals provided, if there are special dietary needs please note on the form.**
- **A good attitude and willingness to share your life with other people.**
- **Any recreational equipment for football, baseball, volleyball, basketball, etc. Note: Many sport items will be provided!**

DO NOT BRING: (THESE ITEMS ARE IN VIOLATION OF CAMP POLICY)

- **Cigarettes or chewing tobacco.**
- **Alcoholic beverages.**
- **Radios or playing cards**
- **Firearms or fireworks.**
- **Improper reading material.**
- **Water balloons and / or water guns.**
- **Any other items that are forbidden by law.**
- **Campers bringing cell phones to camp must surrender phones to the camp office on the first day of camp; they will be returned at the end of camp. The camp will not assume responsibility for missing or damaged phones.**

VISITORS AT CAMP:

All visitors at camp must sign in at the camp office and receive an identification badge. Visitor's who plan on staying for a meal will be responsible for the fees upon signing in. All visitors must leave the camp prior to the campfire, or dusk. Visitor's must check out through the office and surrender their identification badge. The camp reserves the right to restrict visitors to camper's parents or guardian. All visitors agree to abide by the same rules of the camp. For prolonged visits there may be a day camper fee, please inquire at the office.

We also encourage parents to notify the camp on the form of any restraining orders that may prohibit visits to their child by a family member or any other party.

WE STRONGLY RECOMMEND THAT ALL PERSONAL BELONGINGS BE MARKED WITH NAME AND PHONE NUMBER. WE CAN NOT BE RESPONSIBLE FOR LOST PERSONAL BELONGINGS, EVERY EFFORT WILL BE MADE TO RETURN LOST ITEMS TO THEIR OWNERS!