



# Summer Camp 2022 Camper Application

## Registration Form *(photocopy as needed)*

All Pre-Registration Applications must be postmarked by June 1 for Discount. After June 1 Registration will be **FULL PRICE**. Camp check-in is at 2:00pm each opening day of camp. Campgrounds **must** be cleared by 10:00am on the last day of camp.

FORM MUST BE FILLED OUT IN ITS ENTIRETY

### STEP 1: CAMPER INFORMATION (please print clearly)

Camper Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender ☐ M ☐ F  
 Mailing Address \_\_\_\_\_  
 Number Street Apt. City State Zip  
 Phone Number (\_\_\_\_) \_\_\_\_\_

### STEP 2: PARENT INFORMATION (please print clearly)

Mothers Name \_\_\_\_\_ Fathers Name \_\_\_\_\_  
 Phone Number (\_\_\_\_) \_\_\_\_\_ Cell Number (\_\_\_\_) \_\_\_\_\_ Other Emergency No. (\_\_\_\_) \_\_\_\_\_

### STEP 3: CHURCH INFORMATION (please print clearly)

Church Name \_\_\_\_\_ Group Leader \_\_\_\_\_

### STEP 4: PICK A WEEK OF CAMP (check one)

<b>Camp Adventure – July 5-8</b> <b>Grades: 1<sup>st</sup>-4<sup>th</sup></b> <input type="checkbox"/> Early Registration - \$100 <input type="checkbox"/> Registration \$120	<b>Camp Journey – July 11-15</b> <b>Grades: 5<sup>th</sup>-8<sup>th</sup></b> <input type="checkbox"/> Early Registration - \$105 <input type="checkbox"/> Registration \$125	<b>Camp Inspire – July 18-23</b> <b>Grades: 9<sup>th</sup>-12<sup>th</sup></b> <input type="checkbox"/> Early Registration - \$110 <input type="checkbox"/> Registration \$130
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\* Early registration must be postmarked before June 1 to receive discount. \* Registration is open until the first day of camp.

### STEP 5: HEALTH INFORMATION (required)

TO BE FILLED OUT BY PARENT OR GUARDIAN

Do you have hospitalization insurance? \_\_ Yes \_\_ No If so, name of company, policy number, and phone number: \_\_\_\_\_

Is there any information we should have regarding this camper? (i.e., handicaps, restrictions, etc.) \_\_\_\_\_

What communicable diseases has this camper had? *(check all that apply)*

☐ Measles ☐ Polio ☐ Mumps ☐ Chicken Pox ☐ Scarlet Fever ☐ Whooping Cough

When did this camper receive the following immunizations? *(give year)*

Polio \_\_\_\_\_ Diphtheria \_\_\_\_\_ Whooping Cough \_\_\_\_\_ Tetanus Toxoid \_\_\_\_\_

Does the camper have any of the following? *(check all that apply)* ☐ Heart Trouble ☐ Ear Trouble ☐ Asthma ☐ Hernia ☐ Skin Trouble ☐ Lung Trouble ☐ Diabetes

Allergies (Name allergies or medications camper is allergic to. **Camper must bring own EpiPen if needed.**) \_\_\_\_\_

Other \_\_\_\_\_ Name medications presently taking \_\_\_\_\_

Has camper been under medical care within the past three months?

Yes No If so, for what reason \_\_\_\_\_

May be given Tylenol? ☐ Yes ☐ No Benadryl? ☐ Yes ☐ No Ibuprofen? ☐ Yes ☐ No Aspirin? ☐ Yes ☐ No Mylanta? ☐ Yes ☐ No Pepto-Bismol? ☐ Yes ☐ No

\*\* PLEASE FILL OUT MEDICAL FORM IF YOUR STUDENT TAKES MEDICATION OR HAS A MEDICAL PROBLEM, INCLUDING ALLERGIES. \*\*

### STEP 6: SIGNATURES (required)

Realizing that the camp is a leadership training institution, and that it has certain ideals which must be maintained, after having read or have had read to me, I agree to abide by the rules and regulations of the camp, and to waive any and all claims against the District Organization, The Pentecostal Church of God, any of its District Board or its representatives, because of any injury or other damage that may be incurred to me or my property in connection with, or incident to, the Pentecostal Church of God. I give my permission for any pictures take may be used for River Pointe.

CAMPER'S SIGNATURE (required) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

PASTOR'S SIGNATURE (required) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

I hereby authorize the River Pointe and SO MO Youth Ministries and/or it's representative, as an agent for myself to procure medical, hospital or dental care for my child named on this form, in the event of injury or illness while the child is in the care of the above Named, I understand that I am financially responsible for any care procured. It is understood that this authorization given in advance of any specific diagnosis, treatment, or hospital care being required. But is given to proved authority in the part of my agent to consent to such medical care, should it become necessary. \* I also authorize designated medical professionals to dispense over-the-counter medications as needed to the camper listed above.  
\* Please note that upon arrival, each camper will be examined for head lice. If nits of lice are present campers will be turned away with no refund issued.  
\* I hereby irrevocably consent to and authorize the unrestricted use and reproduction by you or anyone authorized by you, of any and all photographs and/or video images which you have taken of the camper listed above, for use within the scope of River Pointe , SOMO Youth Ministries, or the Pentecostal Church of God

This must be signed by the camper's Parent/Legal Guardian.

**PARENT'S OR GUARDIAN'S SIGNATURE** (required) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**For Office Use Only:**

Date Postmarked	Amount Pd.	Church or Personal	Check #
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**7. Activity(ies) Pre-Registration (optional)**

**Instructions**

**Camp Adventure** may select 2 activities.

**Camp Journey** may select 3 activities.

**Camp Inspire** may select 4 activities.

Horseback Riding & Aerial Park are morning activities. You may select them in addition to the number above.

Please note that when you are registered for your activities, you will not be able to change. The day of camp you may add to, but you will not be allowed to switch activities or cancel.

**Camp Adventure Activities**

- ☐ Bowling - \$10
- ☐ Cave Trip- \$10
- ☐ River Rafting - \$22

**Camp Journey Activities**

- ☐ Bowling - \$10
- ☐ Tubing - \$10
- ☐ Paintball - \$10 per day (2 days max)
- ☐ River Rafting - \$22
- ☐ Kayaking - \$25
- ☐ Horseback Riding - \$35
- ☐ Aerial Park with Zipline - \$40

**Camp Inspire Activities**

- ☐ Bowling - \$10
- ☐ Tubing - \$10
- ☐ Paintball - \$10 per day (2 days max)
- ☐ River Rafting - \$22
- ☐ Kayaking - \$25
- ☐ Horseback Riding - \$35
- ☐ Aerial Park with Zipline - \$40

**8. Shirt Order (optional)**

Please select a size and a shirt

**T-Shirt** - add an additional \$15 (\$2 more for 2XL & 3XL) YS YM YL YXL S M L XL 2XL 3XL  
(May not be available for late registered campers.)



☐ Blue Shirt



Front



Back

☐ Black Shirt

**Please Note:**

\*YOU MAY ONLY ORDER THE SHIRT FOR THE CAMP YOU ARE ATTENDING.\*

\*YOUTH SIZES ARE NOT AVAILABLE AT CAMP JOURNEY & INSPIRE.\*

**3. Total Payment Due**

Camp Registration  
+ Activities Total  
+ T-shirt Total  
Total Cost

Per Camp Policies, **No Registration will be Refunded.\*\***  
Please Make Checks Payable to Impact SOMO

Total Cost: \$