

## **COST & DEADLINES**

If you pay your \$50 DEPOSIT before JUNE 1<sup>st</sup>, Total Cost of Camp

\$310

If you pay your \$50 DEPOSIT before JULY 1<sup>st</sup>, Total Cost of Camp

\$320

If you pay your \$50 DEPOSIT after JULY 1<sup>ST</sup>, Total Cost of Camp

\$330

(T-shirt is subject to availability)

All camp payments must be paid in full by July 15th. Fundraiser money cannot be used to pay deposits.

#### **RULES FOR SUMMER CAMP**

#### Please keep this page for your personal reference.

- 1. Do not abuse any equipment or facilities. Pick up all trash!
- 2. All clothing must comply with GOC regulations
  - Ladies, do wear full-coverage shirts and skirts/shorts
    - No "Daisy Dukes" or "Short shorts"!
    - No strapless or off the shoulder shirts
    - Midriffs must be hidden
    - No bikini's unless hidden by a swim shirt.
  - Gentleman, pull your pants up to your waist.
- 3. No romantic displays of affection (holding hands, etc.) It's gross. Really gross.
- 4. Respect the speaker, and those around you, in the chapel settings by not talking, playing around, etc.
- 5. All phones must be kept away during services
- 6. Absolutely no weapons, tobacco, vaping, alcohol, or narcotics
- 7. No fighting or profanity!
- 8. Stay on the property at all times! No wandering off! Even at night. There are bears...
- 9. Obey and respect all staff and leaders.
- 10. Please leave all electronics at home.
- 11. Always stay in groups of 3 or more.
- 12. No guys in girl's room, no girls in the guy's room.
- 13. Have fun! Seriously, it is what you make of it.

### CHECKLIST: WHAT TO BRING

Here is what you should bring. Please be on time because if you are not here, we will leave you behind and we don't want that...

### Please Check off the following:

- Permission slip, medical release form, & payment (if you haven't turned in already)
- Sports clothes for activities and getting dirty
- Swim Suit / towel
- Pajamas
- Toiletries (toothpaste, tooth brush, shampoo, conditioner, deodorant, a towel, and sunscreen.)
- Sleeping bag and Pillow!
- Bible, Notebook and a Pen
- Money for snacks/travel food (You are responsible for your own money)
- Comfortable closed toe Shoes & extra socks (Sports & active wear)
- Good attitude and a desire to be at Camp.
- Pack all these items into one medium size bag.
- Reusable water bottle

#### **SOME QUICK AND IMPORTANT ITEMS:**

- You can't know how excited we are to have you with us on this camp! This will be one of the most memorable times of your life...if you just do a few simple things. Many volunteers have put literally TONS of hours into the preparation of these few days...but unless YOU CHOOSE to have a great week, all of our work will be in vain.
- 2. PLEASE MAKE THIS ONE OF THE MOST "OTHERS CENTERED" WEEK EVER! Whether you are new around here or been here for years, it is so important for you to reach out and make friends with people outside of your immediate friendship group!
- 3. A CAMP IS LIKE EVERYTHING ELSE IN LIFE...YOU GET OUT OF IT WHAT YOU PUT INTO IT! Please don't have a negative attitude.
- 4. REMEMBER: THERE'S A WHOLE LOT OF ADJUSTING WHEN YOUR FAMILY bed. BEGINS TO GROW! Please be sensitive not to irritate others! Try to cut down on the sarcasm and remember your great grandmother's "GOLDEN RULE"...which is "If you don't have something nice to say..."
- 5. NO MATTER WHAT HAPPENS...SMILE! If the van breaks down...SMILE! If the toilet backs up...SMILE! If the showers are cold...SMILE! If it rains...SMILE! It's so important that we make it fun no matter what happens!
- 6. WE ALL STICK TOGETHER! We give you some "chill time" in the afternoon...but we ask that everyone be WHERE THE GROUP IS and ON TIME when we have group things together. (That is mainly during our morning group time and evening services.) Please don't view attendance at these things as optional!
- 7. When we announce times to be in your sleeping areas each night, please follow through for us and do not consider yourself an exception. The reason we ask for everyone to get sleep each night is because "sleepless people" change the tone for everything and send all our work down the drain.
- 8. The place for all the AM & PM meetings is in the main hall. When we arrive at the camp center, claim your luggage and then claim your
- 9. For all you Romeo & Juliet's please put your dreamy love relationships on hold for the week!
- 10. NO CD players, CDs (or music), iPods, alcoholic beverages, illegal drugs, smoking, etc. this entire week. Please help us by leaving all these things behind for this week.
- 11. Do not bring any valuables with you. We cannot be responsible for any lost or stolen items.

# Summer Camp Permission Form Please Print clearly

Last Name:	First Name:	Age:		
Address: (Street, City, State, and Zip Code)				
Cell Phone:	Home Phon	ne: Gender: Male F	emale	
Email Address:	,	'		
T-Shirt Size: (Camp Shirt)				
I would like to room with: (This is not a guarantee)				
Parent/Guardian				
Full Name:				
Address:		Home Phone:		
Health Problems/Medication:		Cell Phone:		
Please fill out the following form and return to the Student Ministries Department				
I,give permission thatwill be(Student Name) attending the following event with Grace International Summer Camp, July 24-28 2017. I also agree to pay for any damages caused by my child during this event. If I am called to pick up my child due to disciplinary problems, I assume full responsibility to transport them home. I do hereby release the Grace Community staff and volunteers from all liability whatsoever arising out of any injury, damage, or loss, which may occur during the student's involvement with the event.				
Signature:(Parent/Gu	uardian Name)	Date:		

<sup>(</sup>Parent/Guardian Name)
\*Tear off the last <u>two documents</u> of this application and turn into your youth leader.

#### **MEDICAL RELEASE FORM**

I,(P	arent/Guardian's Name) her	eby give permission for any and all			
medical attention to be administered to n event of accident, injury, sickness, etc., u	ny child under the direction of the per	(Child's Name). In the			
may be contacted. I also assume the res	sponsibility for the payment of	of any such treatment. This release is			
effective for the period of one year from t	the date given below.				
Darento Nama		Dhanat			
Parents Name	Phone#				
Address	City	State Zip			
Emergency Contacts					
Primary Contact	Relationshin	Daytime Ph			
Trimary Contact	rtciationship	Bayume i m			
Insurance Policy					
Policy Holder's Name	Relationship				
	Phone#				
Address	PIIC	ле <del>н</del>			
Insurance Company					
Policy#Plan#	<u> </u>				
Insurance Company Address:		Phone#			
Medical history					
Does the camper have any of the follo	owing? (If yes, please expla	ain):			
Drug allergies	ug allergiesFood allergies				
Allergies to insect bites	Asthma				
Frequent headaches, dizziness or seizur of activities. Medications the camper is to	es ekina	Other health problems or limitation			
or doublest. Medications are camper to a					
Will the student require any specific treat	tment while participating in o	our program. If yes, please explain			
CONSENT FOR MEDICAL TREATMEN	T (MINOR)				
CONSENT FOR MEDICAL TREATMEN	I (WINOK)				
As the parent of legal guardian of the abcare prescribed by a duly licensed Docto	ove named player, I hereby or of Medicine or Doctor of D	give my consent for emergency medical			
whatever conditions are necessary to pre					
SIGNATURE (PARENT/GAURDIAN)		Date			

<sup>\*</sup>Tear off the last  $\underline{\mathsf{two}}$  documents of this application and mail or  $\mathsf{turn}$  in to your youth leader.