



# 2017 KIDS/YOUTH CAMPER FORM

Camp Location: Baptist Ridge Campground, Warsaw, MO

Roommate preference \_\_\_\_\_

This registration form must be received by the Associational Office, 602 North Holden, Warrensburg, MO 64093 before the camper is considered registered. NO PHONE REGISTRATIONS WILL BE ACCEPTED.

Balance of camp fee will be due the first day of camp, unless prior arrangements have been made. Camp fee includes T-shirt, meals and snack card. NO other money is needed at camp. Forms received after first camp fee deadline may have to wait on T-shirt. **Forms received the day camp begins is \$145. Walk-ins will be registered on a first come - first serve basis and will have to wait until all pre-registered campers have been processed.**

### CAMP ATTENDING (Please check one)

### GRADE JUST COMPLETED (Please check one)

#### KIDS' CAMP -- JUNE 12-16, 2017

Forms received on or before April 30, 2017 \$110  
Forms received May 1 – June 12 \$125  
Forms received the day camp begins \$145

\_\_\_ MALE \_\_\_ FEMALE  
\_\_\_ 2 \_\_\_ 3 \_\_\_ 4 \_\_\_ 5

#### MIDDLE SCHOOL CAMP--JUNE 19-23, 2017

Forms received on or before April 30, 2017 \$110  
Forms received May 1 – June 19 \$125  
Forms received the day camp begins \$145

\_\_\_ MALE \_\_\_ FEMALE  
\_\_\_ 6 \_\_\_ 7 \_\_\_ 8

#### YOUTH CAMP -- JUNE 26-30, 2017

Forms received on or before April 30, 2017 \$110  
Forms received May 1 – June 26 \$125  
Forms received the day camp begins \$145

\_\_\_ MALE \_\_\_ FEMALE  
\_\_\_ 9 \_\_\_ 10 \_\_\_ 11 \_\_\_ 12

T-shirt size: Children \_\_\_ M \_\_\_ L \_\_\_ XL Adult \_\_\_ S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_ 2XL \_\_\_ 3XL \_\_\_ 4XL

## FORM IS TO BE COMPLETED BY PARENT OR GUARDIAN, PLEASE PRINT CLEARLY

Camper's Name \_\_\_\_\_

Address \_\_\_\_\_ Town/City \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_

Are you a Christian? \_\_\_ Yes \_\_\_ No Have you been baptized? \_\_\_ Yes \_\_\_ No When \_\_\_\_\_ Where \_\_\_\_\_

What church are you a member of? \_\_\_\_\_ Town/City \_\_\_\_\_

What church do you attend? \_\_\_\_\_ Town/City \_\_\_\_\_

### ASSOCIATIONAL OFFICE USE ONLY

### PLEASE DO NOT WRITE IN THIS BOX

Date Received \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ Amount Received \_\_\_\_\_ Amount Due \_\_\_\_\_

PreReg \_\_\_ Yes \_\_\_ No Bill Church \_\_\_ Yes \_\_\_ No Church Name \_\_\_\_\_



# 2017 KIDS/YOUTH CAMPER FORM

**ALL MEDICINES and drugs (prescription and over the counter including aspirin, Tylenol, etc.) must be turned into the Camp Nurse upon arrival at registration. All medicines, prescription and over the counter must be in original containers. List medicines and dosage camper is bringing to camp. A head lice check will be done by the nurses at registration time.**

\_\_\_\_\_  
\_\_\_\_\_

Please check all (allergies) that apply:  Sleepwalker  ADHD  Asthma  Bee Sting  Diabetes  Epilepsy/Seizures  
 Hay Fever  Heart Disease  Poison Ivy  Penicillin  Sulfa \_\_\_\_\_ **Date of last Tetanus shot**

Other, Explain: \_\_\_\_\_

EpiPen provided?  Yes  No

Can camper swim?  Yes  No Do they have permission to swim at camp?  Yes  No

List any sports/activities camper should not participate in and why. \_\_\_\_\_

Other information Director of Missions, Camp Director, and Nurse needs to know about camper. \_\_\_\_\_

### PERSON(S) TO NOTIFY IN CASE OF EMERGENCY

Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Address \_\_\_\_\_ Town/City \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Address \_\_\_\_\_ Town/City \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

### PARENT/GUARDIAN CONSENT TO TREAT A MINOR

Name of Insurance Company \_\_\_\_\_ Policy No. \_\_\_\_\_

Family Doctor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

I (we) \_\_\_\_\_

Parent(s) / Guardian (s)

(Date)

hereby give permission for \_\_\_\_\_ to attend West Central Baptist Associational  
(Camper's Name)

Camp, and consent to any x-ray, anesthetic, medical, surgical or dental diagnosis or treatment that may be deemed necessary for my child. Further, I understand that all efforts will be made to contact me prior to treatment. In the event I cannot be reached in an emergency, I give permission to the activity leader to make the decisions necessary for treatment. Should there be no activity leader available, I give permission to the attending physician to treat my minor child. I further understand that the doctors, dentists, and other providers attending to my child will take all reasonable safety precautions during their care. Further, as parent or legal guardian I am responsible for the health care decisions for my minor child and agree that my insurance plan is the primary plan to pay for the dental, medical, or hospital care or treatment that is given to my child. Any policy of West Central Baptist Association will be used as the secondary coverage.

Permission is granted for my child to participate in photos/videos while at camp.  Yes  No

Notary Public

Date



## 2017 KIDS/YOUTH CAMPERS INFORMATION

### KIDS' CAMP -- JUNE 12-16, 2017

Girls and Boys who have completed Grades 2-5  
Registration begins on Mon., June 12, 2017 2:00 PM  
Camp Closes 10:00 AM, Friday, June 16  
Forms received on or before April 30, 2017 \$110  
Forms received May 1 – June 12 \$125  
Forms received the day camp begins \$145

### MIDDLE SCHOOL CAMP -- JUNE 19 - 23, 2017

Girls and Boys who have completed Grades 6-8  
Registration begins on Mon., June 19, 2:00 PM  
Camp Closes 10:00 AM, Friday, June 23  
Forms received on or before April 30, 2017 \$110  
Forms received May 1 – June 19 \$125  
Forms received the day camp begins \$145

### HIGH SCHOOL CAMP -- JUNE 26-30, 2017

Girls and Boys who have completed Grades 9-12  
Registration begins on Mon. June 26, 2:00 PM  
Camp Closes 12:00 NOON Friday, June 30  
Forms received on or before April 30, 2017 \$110  
Forms received May 1 – June 26 \$125  
Forms received the day camp begins \$145

**Walk-ins will be registered on a first come, first serve and will have to wait until all pre-registered campers have registered. The cost of walk-ins is \$145**

**LOCATION- BAPTIST RIDGE CAMP, WARSAW -- DIRECTIONS FROM WARSAW:** Go south on Highway 65 approximately five miles, turn right on Hilty Ave. (at New Home Baptist Church sign) and follow signs or turn left on next gravel road on left (Hopkins Ave.) then turn right on next gravel road to right (Baptist Ridge Road). Turn right into camp. Website directions: <https://goo.gl/w4qECR>

### **CAMP FACILITIES ARE AIR CONDITIONED!!!**

### **CAMPERS AND COUNSELORS, PLEASE BRING THE FOLLOWING:**

Pillow, sheets and/or sleeping bag, towels-2 or 3 for bathing **AND** 2 or 3 for swimming, washcloths, toothbrush, toothpaste, soap, shampoo, deodorant, comb/hairbrush, changes of modest clothes for each day, shoes other than flip-flops, older clothes and tennis shoes for recreation time, pajamas, swimsuit, your Bible, pen and paper, an umbrella, A SMILE, A SENSE OF HUMOR AND PLANS TO HAVE A GOOD TIME AND LEARN MORE ABOUT HAVING A CLOSER RELATIONSHIP WITH GOD. **LADIES, modest one piece swimsuit only, please NO two-piece bathing suits, NO short shorts, NO spaghetti strap tops, NO low cut tops, or NO skin tight yoga pants. These will not be permitted.**

**CAMPERS DO NOT BRING THE FOLLOWING:** No electronics of any kind. Fireworks of any type are prohibited. NO MONEY is needed other than the camp fee, which includes a T-shirt and a snack card. For several years, snack cards have been included in the fees, and we plan to stay with this system for two reasons. (1) Every camper has an equal amount of funds available for snack time each day. (2) This means your camper does not need to carry any money with him/her during camp and does not present a temptation to any other camper or the opportunity to lose it. **NO TOBACCO OR ALCOHOL PRODUCTS, FIREARMS OR OBSCENE LANGUAGE OR CLOTHING ARE ALLOWED ON THE CAMPGROUNDS.**

**PARENTS AND CAMPERS:** If any of the above items are brought they must be turned into the camp directors at registration, and they will be returned on Friday when they leave. If these items aren't brought to camp, they will not be a temptation for someone to take, to be damaged, or to be lost. If someone NEEDS to call home, they should talk to the Camp Directors or Director of Missions who will have their cell phones for emergency use. If there is an emergency and a parent/family member needs to contact a camper, they can call the Associational Office (660-747-3628 or secretary 660-909-2046) and they will get in contact with the Camp Directors and/or Director of Missions.

**CAMPERS:** Make plans to attend the full week. **NO ONE** will be allowed to leave and return for ballgames, fairs and etc. When someone leaves and returns, they become a distraction for other campers and it interferes with the business at hand, which is for each person attending camp to gain a closer relationship with God.

**MEDICATION:** ALL MEDICINES, PRESCRIPTIONS AND OVER THE COUNTER MEDS, MUST BE IN THEIR ORIGINAL CONTAINERS AND TURNED IN TO THE CAMP NURSE/MEDIC AT REGISTRATION. Head lice check will be done by the nurses at registration time.

**Balance of camp fee will be due the first day of camp, unless prior arrangements have been made. Camp fee includes T-shirt, meals and snack card. NO other money is needed at camp. Forms received after first camp fee deadline may have to wait on a T-shirt.**

Mail forms to or for more information:  
West Central Baptist Association  
602 North Holden, Warrensburg, MO 64093  
Phone: 660-747-3628 Fax: 660-747-2463  
Email: westcentralbaptistassociation@gmail.com