

West Central Baptist Association -- 2010 Camper's Registration Form
(Baptist Ridge Camp, Warsaw, MO)

Roommate Preference _____

ATTENTION ALL CAMPERS AND PARENTS: We are asking that ALL students stay on campus for the entire week. When a camper leaves for a ball game or other activity and then returns, they become a distraction for other campers and staff. The business at hand is coming into a closer relationship with God. Help us bring your young people to a deeper spiritual life.

Registration form must be received by the Associational Office before the camper is considered registered. Camps are filled on a first come, first serve basis. After camps are full, names will be added to a waiting list as in the past. **NO PHONE REGISTRATIONS WILL BE ACCEPTED!**

The pre-registration fee (\$25.00) for each camper is due with their registration form at the Associational Office by the deadline listed below. Balance of camp fees will be due the first day of camp, unless prior arrangements have been made. Camp fees include t-shirt, meals and snacks, so **NO** other money is needed at camp.

Is your church paying all or part of your camp fee? _____ yes _____ no
 If so, church name _____ Town/City _____

Please turn this form in to your church office or treasurer or mail form and check to:

West Central Baptist Association
 602 North Holden P.O. Box 255
 Warrensburg, MO 64093

CAMP YOU WILL ATTEND
 (Please check one)

HIGH SCHOOL CAMP, JUNE 14-18, 2010 _____
 \$25 pre-registration fee deadline is May 31. Total COST \$95.
 Registration forms received after May 31, is \$105.

MIDDLE SCHOOLCAMP, JUNE 21-25, 2010 _____
 \$25 pre-registration fee deadline is May 31. Total COST \$95.
 Registration forms received after May 31, is \$105.

CHILDRENS CAMP, JUNE 28-JULY 2, 2010 _____
 \$25 pre-registration fee deadline is May 31. Total COST \$95.
 Registration forms received after May 31, is \$105.

GRADE YOU JUST COMPLETED
 (Please check one)

Male _____ Female _____
 8 _____ 9 _____ 10 _____ 11 _____ 12 _____

Male _____ Female _____
 6 _____ 7 _____

Male _____ Female _____
 3 _____ 4 _____ 5 _____

Camper's Name _____

Address _____ Town/City _____ Zip _____

Phone _____ Date of Birth _____

What church do you attend? _____ Town/City _____

What church are you a member? _____ Town/City _____

Are you a Christian? ___ Yes ___ No Have you been baptized? ___ Yes ___ No When _____ Where _____

Can you swim? Yes _____ No _____ Do you have permission to swim while at camp? Yes _____ No _____

Can you participate in active sports? Yes _____ No _____ If no, why? _____

ALL MEDICINES AND DRUGS (INCLUDING ASPIRINS, TYLENOL, ETC.)
MUST BE TURNED IN TO THE CAMP NURSE UPON ARRIVAL AT REGISTRATION.

ALL MEDICINES, PRESCRIPTION AND OVER THE COUNTER MUST BE IN ORIGINAL CONTAINER.

PARENTS or GUARDIANS, when you sign this form you are authorizing the camp nurse to administer any medications, including aspirin, Tylenol (for headache and pain), calamine lotion for poison ivy) while your child is at camp.

Are you a sleepwalker? Yes _____ No _____ Date of last tetanus shot _____

Allergies (answer yes or no) - Bee Sting _____ Poison Ivy _____ Penicillin _____, Other(s) _____

Are you at present under a doctor's care? Yes _____ No _____ If so, for what reason _____

Will you be bringing medicines to camp? Yes _____ No _____ If yes, name of prescription, and dosage _____

Other information the Director of Missions, Camp Director and/or Nurse will need to know about the camper. _____

PERSON(S) TO NOTIFY IN CASE OF EMERGENCY

Name _____ Relationship to camper _____

Address _____ Town/City _____

Home Phone _____ Work Phone _____ Cell Phone _____

PARENT/GUARDIAN CONSENT TO TREAT A MINOR

Parents/Guardians, it would be very helpful if your signature was notarized on each camper's form. Most banks have notary public and do not charge for this service. They do request that you DO NOT sign your names in the PARENT/GUARDIAN CONSENT section below until in the Notary's presence.

Being the parent or legal guardian of _____ (minor's name printed) I _____ (parent/guardian/s name printed) do 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 the organization sponsoring this event will be used as the secondary coverage.

Name of Insurance Company _____ Policy No. _____

Family Doctor _____ Address _____ Phone _____

I _____ hereby give my permission for

(Parent or Guardian)

(Relationship to camper)

_____ to attend West Central Baptist

(Camper's Name)

(Date signed)

Associational Camp, and I give my permission to the physician selected by the Director of Missions or Camp Director to secure proper treatment for my child named above in case of an emergency. I also agree that my child will be staying for the entire week, and not leaving for a ballgame or other activity.

Notary Public

Date

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 _____

2010 CAMP INFORMATION

NEW 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.

CAMPERS AND COUNSELORS , PLEASE BRING THE FOLLOWING:

Pillow, sheets and/or sleeping bag), towels, washcloths, toothbrush, toothpaste, soap, shampoo, deodorant, comb/hairbrush, flashlight, Bible, paper and pen, modest clothing, (Short shorts and spaghetti strap tops will not be permitted), swimsuit, (*LADIES, please no two-piece bathing suits. Modest one piece suits only, PLEASE! GUYS:, NO speedos!!*), a SMILE and a good sense of humor. For recreation, students should bring sportswear, baseball glove, jogging shoes, etc. and an umbrella in case of rain. **CAMP FACILITIES ARE AIR CONDITIONED!!!**

CAMPERS AND COUNSELORS, DO NOT BRING THE FOLLOWING: CELL PHONES, PAGERS, CD players of any size, radios, stereos, microwaves, refrigerators, lap-top computers, electronic games of any kind (This includes 'Game Boy's, personal DVD players, and etc). FIREWORKS OF ANY TYPE ARE PROHIBITED. The above listed items can distract from the purpose of camp — which is for each person come to a closer relationship with God. If there is an emergency and a parent/family members needs to contact a camper, they can call the Associational office and they will get in contact with the Camp Directors/Director of Missions.

PARENTS AND CAMPERS: If any of the above items are brought they must be turned in to the camp directors, and the campers can get them back on Friday when they leave. If these items aren't brought to camp, they will not be a temptation for someone to take, damage, or lose. If someone NEEDS to call home, they will need to talk to the Director of Missions who will have his cell phone for emergency use.

MONEY: No money is needed other than the camp fee, which includes a T-shirt and a snack card. **SNACK CARDS:** 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 the snack times 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.

MEDICATION: ALL MEDICINES, PRESCRIPTIONS AND OVER THE COUNTER, MUST BE IN THEIR ORIGINAL CONTAINERS AND TURNED IN TO THE CAMP NURSE/MEDIC AT REGISTRATION.

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 becomes a distraction for other campers and it interferes with the business at hand, which is coming into a closer relationship with God.

Mail forms to or for more information:

West Central Baptist Association

602 North Holden P.O. Box 255

Warrensburg, MO 64093

Phone: 660-747-3628

Fax: 660-747-2463

Email: westcentralbaptist@embarqmail.com

MIDDLE SCHOOL CAMP June 21--25, 2010

Girls and Boys who have completed Grades 6-7

Registration begins on Mon. June 21, **2:00 p.m.**

Camp closes- 10:00 A.M. Friday June 25

Cost is \$95.00

(Includes \$25 pre-registration fee, snack card and a T-shirt)

\$25 pre-registration fee deadline is May 31, 2010.

Registration forms received after May 31, is \$105

HIGH SCHOOL CAMP June 14-18, 2010

Girls and Boys who have completed Grades 8-12

Registration begins on Mon. June 14, **2:00 p.m.**

Camp closes- 12:00 NOON Friday June 18

Cost is \$95.00

(Includes \$25 pre-registration fee, snack card and a T-shirt)

\$25 pre-registration fee deadline is May 31, 2010.

Registration forms received after May 31, is \$105.

CHILDRENS CAMP June 28- July 2, 2010

Girls and Boys who have completed Grades 3-5

Registration begins on Mon. June 25, **2:00 p.m.**

Camp closes- 12:00 NOON Friday July 2

Cost is \$95.00

(Includes \$25 pre-registration fee, snack card and a T-shirt)

\$25 pre-registration fee deadline is May 31, 2010.

Registration forms received after May 31, is \$105.