

Central Area — Christian Church in the Southwest



# Event Packet

For

## Central Area Camps

2009

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# Central Area — Christian Church in the Southwest

## Camps & Conferences Information — Page One (1 of 3)

### 2009

*The following Camps and Conferences are sponsored by the Central Area of the Christian Church (Disciples of Christ) and are provided as an adjunct to the youth programs of the congregations in the Area.*

#### **CYF Conference**

**June 7-13**

For youth who have completed grades 9, 10, 11 or 12.  
Check-in time: 4:00p.m. Sunday - Camp ends: 10:00a.m. Saturday  
Registration Fee: \$320/camper

#### **Eighth Grade Youth Conference**

**June 28 – July 4**

For youth who will have completed the eighth grade. This camp focuses on self-esteem, Christian human sexuality, and transitions to CYF. We combine with Tres Rios and Hi Plains Areas to provide this camp. It will be held at Ceta Glen Camp in Happy, Texas  
Check-in time: 4:00p.m. Sunday - Camp ends: 10:00a.m. Saturday  
Registration Fee: \$302/camper \$325 after 6/12 and you will register thru Hi Plains Area

#### **JYF Camp**

**July 12-16**

For youth who have completed grades 4 or 5  
Check-in time: 4:00p.m. Sunday – Camp ends: 10:00a.m. Thursday  
Registration Fee: \$ 255/camper

#### **Chi Rho Camp**

**July 12-17**

For youth who have completed grades 6 or 7  
Check-in time: 4:00p.m. Sunday - Camp ends: 10:00a.m. Friday  
Registration Fee: \$279/camper

#### **New Beginnings Camp**

**July 17-19**

For youth who have completed grades 2 or 3. Each child attending this camp must have one (1) adult family member accompany them to participate by serving as a counselor.  
Check-in time: 7:30p.m. Friday - Camp ends: 10:00a.m. Sunday  
Registration Fee: \$88/camper/counselor

The directors and program team members of these camps have been recruited by the Central Area and the counselors of these camps have been recruited by the camp directors. All have been certified by their congregations as experienced and qualified camp program leaders and participants. Through the leadership of these adults the Central Area camps and conferences provide youth and adult participants opportunity to grow spiritually, mentally, socially, and to develop and practice leadership skills which can strengthen their participation in their home churches. These opportunities come through planned total camp and small group activities and the daily sharing that is a part of camp life.

All Central Area camps and conferences are held at Lake Brownwood Christian Retreat (LBCR) except 8ers. The camp is located on Lake Brownwood off State Park Road 15. This 33 acre camp facility is owned and operated by the LBCR Board of Directors. LBCR has air-conditioned dining, sleeping, and meeting facilities. Campers will swim in their pool under strictly controlled conditions. Indoor and outdoor recreational facilities are available for activities and drink machines are available at designated times. All camp participants are covered by camp health and accident insurance, and LBCR maintains an infirmary and first aid providers on-site as well as in Brownwood.

# Central Area — Christian Church in the Southwest

## Camps & Conferences Information — Page One (2 of 3)

### 2009

The registration fees listed include a camp picture, snacks, meals, lodging, insurance, and programs costs. Campers will need to bring money for meals en route, cokes, offering, and camp store (if desired). This year, 4/5 & 5/3 have been designated as Camp Registration Sunday for all Central Area churches. Any registration a church receives after 5/3 will require an additional late fee of \$10.00. Then each camp will have a late-late fee of \$25.00 – please see each camp's Registration Form for the date that applies. Absolutely no registrations will be received during the week prior to each individual camp. CHECK TO SEE WHEN YOUR FORM MUST BE TURNED IN AT YOUR CHURCH TO QUALIFY FOR THEIR DEADLINE.

**Although suspended for school vacation time, ADD/ADHD/behavior control medications must be sent to camp with your child.**

**ALL MEDICATIONS MUST BE IN THEIR ORIGINAL PHARMACY LABELED BOTTLES.**

#### When you come to camp, you will want to bring:

Your most cooperative, creative, and pleasant self	Your Bible
Sleeping bag and/or bedding & pillow	Light jacket/sweater
Toiletries (soap, shampoo, toothbrush, etc.)	Flashlight
Towels (bath and beach)	Swim suit, sandals
Non-aerosol insect repellent	Bag for dirty clothes
Cool, comfortable summer clothes	Camera and film
Musical instruments (guitar, tuba, harmonica)	Stationery and stamps
Notebook and pen/pencil	Offering money
Tape/CD players	Electronic Games
Enthusiasm!!!	

#### Do not bring:

Candy, food, snacks of any kind	Cell phones
Alcohol or tobacco products or illegal substances	Skateboards, roller blades
Radios TV's, jam boxes	Fireworks, firecrackers
Valuable jewelry, "church" clothes	Lots of money
An attitude (language, behavior, clothing) that is inappropriate for a Christian camp	Guns or weapons of any kind

**Undesired items will be confiscated and campers exhibiting undesirable behavior may be sent home.**

**Care Packages containing candy, gum, food are prohibited.**

**Per the vote of LBCR Board – No candy, food, snacks will be allowed.**

Campers may receive mail which should be addressed to:

Camper's Name  
Camp Name (i.e. CYF Conference)  
LBCR  
9030 Retreat Road  
Brownwood, TX 76801

The camp phone number is: 325/784-5133 and this number is answered 24 hours per day during camp, however this is not a public phone. Campers are not permitted to make or receive phone calls except in emergency situations as determined by the event director. Visitors are not permitted during the week except in emergency or special need situations.

# Central Area — Christian Church in the Southwest

## Camps & Conferences Information — Page One (3 of 3)

### 2009

Central Area **REFUND POLICY** as it applies to Lake Brownwood Camping Programs: 100% less \$25.00 for medical emergencies up to the beginning hour of the camp or with 7 days advance written requests; 50% less \$25.00 after the beginning hour of camp if written request is received in the area office within 7 days and prior phone notice was received at the area office; **no** refunds for non-emergency cancellations after the beginning hour of camp (i.e., no shows). No refunds or prorations will be granted if a child/parent or adult decides to cut a camp short -whether the decision is made after or before camp starts.

If the camp nurse decides that a child must go home due to illness or some other condition, up to the midpoint of camp, fees may be prorated with a cap of 50%. After the midpoint of camp, no refund will be granted.

This is because there are costs just in planning for that child or adult to be present at the camp. Food is purchased ahead of time as well as supplies for crafts and other events. The Central Area is charged for every meal and night's stay per head count.



Central Area **LICE POLICY** as it applies to Lake Brownwood Camping Programs: In accordance with CCI guidelines, a head check will be done of every camper upon arrival at camp and before check-in at a dorm. Drivers who bring children to camp must wait until every child has been checked before leaving camp grounds.

A child who is found to have evidence of infestation or any other infectious condition will be requested to return home. The refund policy states that only 50% of the camp fee less \$25.00 administrative costs may be refunded when the area office receives a written request from the parent.

Due to the fact that treatment for lice involves a lengthy amount of intervention by the parent, it is suggested that the child not try to return to camp. The child must be gone at least 48 hours before attempting to return. In order to return for part of camp, all clothing and bedding will need to be washed in hot water and dried at a high heat. Articles that cannot be treated thus will need to be bagged air tight for 7-10 days. It is suggested that a new pillow be sent to camp. Combs, brushes and hair implements will need to be replaced with new ones also. A pesticide shampoo must be used such as RID or NIX. (The empty bottle should accompany the child back to the camp nurse.) All nits must be removed from the hair. And the child will be rechecked by the camp nurse to determine that the child is lice free and totally nit free. If the Olive Oil treatment suggested by the TDH is used, the child may not return. If there was evidence of multiple lays of nits, the child may not return to camp.

If a child is determined to have an infestation after camp has begun, every effort will be made to determine the source. Parents will be notified to pick up their child for appropriate treatment. A return to camp is not advisable.

# Central Area — Christian Church in the Southwest Camps & Conferences Camper Registration Form 2009

Check the camp for which you are registering:

- Eighth Grade Youth Conference** (completed grade 8) .. June 28-July 4
- CYF Conference** (completed grades 9-12) ..... June 7-13
- JYF Camp** (completed grades 4 or 5) ..... July 12-16
- Chi Rho Camp** (completed grades 6 or 7) ..... July 12-17
- New Beginnings Camp** (completed grades 2 or 3) ..... July 17-19

\*\*\*\*\*CURRENT RECORD OF CAMPERS IMMUNIZATION / SHOT RECORD REQUIRED\*\*\*\*\*

Name:			Social Security No:		
Address		City:		ZIP:	
Parents/Legal Guardian			Home Phone:		
Insurance Company Name:			Policy No:		
Insurance Company Address:			Ins. Co. Phone:		
Emergency Phone Numbers:					
Name of Church Registering You:			Are You Member: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Minister's Name:			Church Phone No:		
If you are NOT a member of registering church, name of home church:					
Birth date:	Age:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F		Grade Just Completed:	
Previous Camp Experience:			E-mail:		
<input type="checkbox"/> New Beg.	<input type="checkbox"/> JYF	<input type="checkbox"/> Chi Rho	<input type="checkbox"/> 8 <sup>th</sup> Grade YC	<input type="checkbox"/> CYF	<input type="checkbox"/> Water Sports

### COVENANT OF CONDUCT

Youth are expected, during the event, to:

- † Participate fully in all scheduled activities
- † Be present for the entire event
- † Be accountable to the adult leaders of the event - Directors, Counselors, Staff
- † Live a disciplined, Christian lifestyle in community with others and refrain from language, jokes, clothing, activities that are off-color, prejudicial, or non-Christian
- † Honor and abide by all LBCR and event rules
- † Not make or receive telephone calls

The Discipline Management Plan is as follows:

- 1<sup>st</sup> Offense:** The camper will be given a warning and will be assisted in correcting the problem.
- 2<sup>nd</sup> Offense:** Director and Staff member will discuss the problem and suggest disciplinary action to be taken. Corporal punishment is not an option. Privileges withheld are the norm.
- 3<sup>rd</sup> Offense:** Director will call Area Minister, minister of the camper's sponsoring church, and the camper's parents/guardian to make arrangements for the youth to leave camp. **Immediate send-home offenses include:** 1) Use of illegal drugs or alcohol 2) Irresponsible behavior that places self or another in danger

BY SIGNING THIS FORM, I ACKNOWLEDGE THAT I UNDERSTAND THE COVENANT OUTLINED ABOVE, AGREE TO THE TERMS OF THE DISCIPLINE MANAGEMENT PLAN, AND ACCEPT MY ROLE IN THEM.

Camper \_\_\_\_\_ Date \_\_\_\_\_  
 Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_  
 Minister \_\_\_\_\_ Date \_\_\_\_\_

# Central Area — Christian Church in the Southwest Camps & Conferences Camper Health Information Form 2009

[THIS FORM REQUIRES NOTARIZATION]

Name \_\_\_\_\_ Age \_\_\_ Height \_\_\_ Weight \_\_\_ Sex \_\_\_

General Health Condition \_\_\_\_\_ Date of last exam by physician \_\_\_\_\_ Reason \_\_\_\_\_

Physician's Name & Number \_\_\_\_\_

Recent injury, illness, exposure to contagious/infectious disease \_\_\_\_\_

Medications to be taken at camp (give name, purpose, dosage, frequency) \_\_\_\_\_

Date of last tetanus shot or booster \_\_\_\_\_

Medication NOT to be given at camp (aspirin, antihistamine, etc.) \_\_\_\_\_

Special dietary restrictions/needs \_\_\_\_\_

Restrictions on activity at camp (swimming, hiking, running) \_\_\_\_\_

**Allergies:**

penicillin                       sulfa/other drugs     tetanus shots  
 bee/insect stings             poison ivy/oak        dust/mold             other \_\_\_\_\_

**History of/under care for:**

heart disease     epilepsy             diabetes             asthma             bronchitis         pneumonia  
 allergies                       tonsillitis                       appendicitis         hernia             ulcer/digestive  
 disorder  
 hyperactivity     other \_\_\_\_\_

**Subject to:**

fainting             cramps             skin rashes         convulsions         sore throat         swimmer's ear  
 headaches                       nose bleeds         exhaustion         earaches             colds             toothaches  
 sleep walking     constipation         diarrhea             home sickness

Have you had your tonsils removed? \_\_\_\_\_ Your appendix? \_\_\_\_\_

Girls, has menstruation begun? \_\_\_\_\_ If not, have you been told about it? \_\_\_\_\_

**Check if you wear:**

orthopedic brace or prosthesis     glasses     contacts     orthodontic braces     a retainer     hearing aid

**May the camp nurse give your child** Benadryl<sup>®</sup>, Tylenol<sup>®</sup> and/or topical solutions to treat them for minor aches, pains, and ailments as they should be come evident? All medications will be administered in accordance with manufacturers directions. YES No

Although suspended for school vacation time,  
ADD/ADHD/behavior control medications must be sent to camp with your child.  
**ALL MEDICATIONS MUST BE IN THEIR PHARMACY LABELED BOTTLES.**

**PARENT/GUARDIAN RELEASE**

\_\_\_\_\_ has my permission to participate in the above-named camp. I agree and consent to the camp nurse or other staff and counselors securing such emergency medical care and treatment as may be necessary for my child en route to or from or during said camp. The camp nurse may administer all medications in accordance with standing orders for the camp. I further release the camp director and counselors, the staff of Lake Brownwood Christian Retreat, and the Central Area of the Christian Church in the Southwest from responsibility and liability for any accident or illness occurring during this camp. Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Printed name of Parent/Guardian: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 2009.

(seal / stamp)

Notary Public: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

# Central Area — Christian Church in the Southwest Camps & Conferences Counselor Application Form 2009

Name: \_\_\_\_\_

Mailing Address:		City, ZIP:	
Alt. Address:		City, ZIP	
Home Phone:		Work Phone:	
Age:	Birth Date:	Sex <input type="checkbox"/> M <input type="checkbox"/> F	Marital Status: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> D
Occupation:			Social Security #:
Driver's License No:		State:	E-Mail:

I am an active, participating member of Christian Church in (city): \_\_\_\_\_

**I apply to serve as a counselor for the following camp(s):**

CYF Conference  Chi Rho Camp  JYF Camp  Eighth Grade Youth Conference  New Beginnings

**Youth related experience in the local, Area, Regional church:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**I believe the role of the adult counselor in a church camp is** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**In previous camps I have been responsible for:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Hobbies/skills/interests:** \_\_\_\_\_  
 \_\_\_\_\_

I have never been charged with nor convicted of physical or sexual abuse of a minor. As a counselor for the Central Area I agree to abide by and enforce the rules and policies established by the Lake Brownwood Christian Retreat, the Central Area Covenant Youth Committee, and the Camp Director, and to conduct myself in an adult Christian manner. I furthermore authorize those persons who receive my Camp Counselor Application form and/or their agents to make inquiries regarding me and all statements contained in these forms. I also authorize all persons, entities, former employers, courts, law enforcement and other public agencies to respond to inquiries concerning me, to supply verification of the information provided in this form, and to comment and state opinions regarding my background and character. I hereby release all such entities and individuals from all liability and responsibility arising from their doing so.

Signature \_\_\_\_\_ Date \_\_\_\_\_



Central Area — Christian Church in the Southwest  
**Adult Applicant's Local Church Recommendation / Certification Form**  
**2009**

The Christian Church of \_\_\_\_\_  
Print Church Name and City or Location

affirms that \_\_\_\_\_  
Print Name of Individual Being Recommended

is an active and participating member of this congregation and has the Christian maturity and background/experience desired as camp counselor. We unconditionally recommend him/her for a Central Area camp, and we further certify that, to our knowledge, he/she has never been accused or convicted of physically or sexually abusing a minor.

\_\_\_\_\_  
Signature of Minister or Board Moderator/Chair

\_\_\_\_\_  
Date

Central Area — Christian Church in the Southwest  
**Adult Applicant's Hepatitis B Statement**  
**2009**

I understand that in the course of rendering first aid to a camper I may become exposed to blood and it will be my responsibility to start the Hepatitis B series within 24 hours in order to protect myself.

\_\_\_\_\_  
Signature of Counselor

\_\_\_\_\_  
Date

I have previously had the Hepatitis B series and am fully protected.

\_\_\_\_\_  
Signature of Counselor

\_\_\_\_\_  
Date

## Central Area — Christian Church in the Southwest

September 22, 2008

TO: Minister, Youth Minister, Youth Sponsors  
FROM: Central Area Covenant Youth Committee  
RE: CAMP REGISTRATION SUNDAY - APRIL 5, 2009  
Camp Registration Deadline - May 3, 2009

The Covenant Youth Committee is asking all churches to pre-register their youth for summer camps on April 5. This gives you the opportunity to promote camps in front of the entire congregation and to make the process simpler by handling all registrations at one time. We suggest that you enlist an individual by March 1 to serve as your Summer Camp Registrar.

The following promotional materials are included in the Event Packet:

- 2009 Camps & Conferences Information
- 2009 Camps & Conferences Camper Registration/Health Form
- Camp Counselor Application materials
- Instructions to Registrar/Press Releases
- Poster for your bulletin board Registration List for each camp

Make as many copies of these forms as necessary. **Please be sure to copy the Health/Registration forms on one page, front & back.**

On Sunday, April 5, set up a registration table in a conspicuous place. Have sufficient pens and Health/Registration forms available **plus a notary**. We are asking families to complete registrations on April 5 and pay all fees by May 3. However, we do realize that sometimes this is difficult for families to do, especially those with more than one camper. If this situation arises, there are payment alternatives. See each camp's registration list for payment dates & amounts if you do not take advantage of early registration.

Before mailing your church's registration, be sure to keep a copy of each Camp's Master Registration Form for your records - which youth are registered for which camp - since the Area office will not be sending confirmation notices.

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Registration materials must be received in the Central Area office by Friday, May 8. A May 4 postmark will be acceptable. Please send ONE CHECK, a completed Camp Master Registration Form for each camping event, and all Health/Registration forms.

**NO REGISTRATIONS WILL BE ACCEPTED WITHOUT:**

- 1. COMPLETED FORMS**
- 2. NOTARIZED SIGNATURES**
- 3. CURRENT COPY OF IMMUNIZATION/SHOT RECORDS**

Please feel free to contact the Central Area office at 325/676-5796 or [cea@ccsw.org](mailto:cea@ccsw.org) if you have any questions.

# Central Area — Christian Church in the Southwest

## Instructions for Summer Camp Registrar

### 2009

Thank you so much for agreeing to serve in this very important role in our summer camp and conference program! We hope these instructions are helpful and will answer most questions. We have tried to provide you this information in ample time to allow sufficient publicity within your church. Please feel free to begin advertising immediately!! Do publicity as appropriate to the calendar of your own congregation. If you need further information, please contact the Central Area office at 325/676-5796 or [cea@ccsw.org](mailto:cea@ccsw.org).

Be sure CAMP SUNDAY is well publicized!

#### ASAP

-distribute "2009 Event Packet" on Sundays, mail to homes, or forms can be found on our website at [www.central-area.org](http://www.central-area.org). They can be completed online and copied complete.

-begin including press releases in your newsletter

#### Week of March 29th

-announce Camp Registration Sunday in church. Tell them forms will be available for completion or they can complete the forms online, copy, and bring to you completed. Go to [www.central-area.org](http://www.central-area.org).

-include press release for the final week in your newsletter

#### On April 5th

- Announce that it is CAMP REGISTRATION SUNDAY. Set up a table in a VERY conspicuous place. We suggest that registration be immediately after your Sunday morning worship in an area where most people gather. Be sure to have plenty of pens and copies of the Camp Information/Health form available and please have a notary on site.
- There should be *one form* PER CAMPER PER CAMP. Copy as many forms as necessary (please be sure to copy the Health/Registration forms on one page, front and back) from the one (master) provided. Be sure the specific camp the camper is attending is marked clearly on the form in the space provided.
- **Remember:** You must have a notary on site - arrange for someone now!!!

#### On April 6th

- Complete a REGISTRATION LIST for *each* camp in which your church's youth will be participating. Type or print clearly each camper's name, address, phone number and grade completed. Keep a copy of each of these summary sheets for YOUR church's records.
- Mail a registration list for each event you have received as of 4/5, with all completed information/health forms. Mail an updated list with a single check from your church to arrive in the Central Area office, 1420 N 3rd, Abilene, TX 79601, by *Friday, May 8*. You should assess the late fee on all registrations you receive after May 5. Updates between 4/5 and 5/3 will be appreciated.

Thank you for your help and participation in this year's Camp Registration Sunday.

# Central Area — Christian Church in the Southwest

## Press Release

### 2009

#### \*\*\*\*Press Releases\*\*\*\*

Following are suggestions for Newsletter articles and/or cover letters to send out to inform parents and your congregation of the upcoming Camp Registration Sunday for the Area.

SAMPLE COVER LETTER to send along with camp information, registration forms:

Dear Children, Youth, and Parents: School is almost out and summer is fast approaching! Now is the time to make plans for camp. Enclosed you will find an information form and registration forms. Camp can be one of the best experiences in a life time. Ask anyone who's been to one of the camps, and they may find it difficult to describe the combination of fun, Christian friends, and lifetime memories that can be found at beautiful Lake Brownwood Christian Retreat. It is simply an event that you must experience for yourself!

(If this type info applies to your church) offers to pay one half of the registration fee for all church members and youth group members. Additional financial aid is available on a confidential basis by contacting the church office. We feel that money should never be a barrier keeping anyone from the ministry that can occur within the context of these uplifting summer programs.

We hope your summer plans include one of these camping experiences! If you have any questions, or if you need any additional information (or registration forms) contact the church office. Forms can be downloaded from the Central Area web site: *central-area.org*. The forms can be filled out online, then copy and bring to the church completed.

#### **Week of March 22nd**

By now you should have received information (or have seen it around) about Central Area Camps and Conferences. If not, please pick up an Event Packet this Sunday.

8th Grade Youth Conference June 28-July 4 – register thru Hi Plains Area

CYF Conference June 7-13

JYF Camp July 12-16

Chi Rho Camp July 12-17

New Beginnings July 17-19

#### **Week of March 29th**

CAMP REGISTRATION IS SUNDAY - APRIL 5th

This Sunday, (when & where) we will be registering all youth who are going to church camp this summer. Please bring your completed Camper Health Information/Registration forms PLUS a current copy of your campers immunization / shot record PLUS your check for the fees on Sunday. Remember registration by this Sunday will entitle you to early registration fees and a notary public will be on hand to notarize your form.

**FOR THE YEAR OF 2009 – YOU MUST REGISTER THRU HI PLAINS AREA**

Central Area — Christian Church in the Southwest  
**Registration Form**  
**2009**

**Eighth Grade Youth Conference**  
 June 14-20

**REGISTRATION INSTRUCTIONS:**

1. Mail one copy of this form, a Registration/Camper Health form for each camper, Counselor Application/Health form for each counselor applicant, and one check for all registrants (payable to Central Area) to: Central Area 1420 North Third Abilene, TX 79601 **Please be sure the Health forms are NOTARIZED!**

2. The deadline for registrations to the Central Area office is a May 4 postmark. A late fee of \$10.00 per person will apply after May 3, late/late fee of \$25.00 after June 1, and no registrations will be accepted after June 5.

\*\*\*\*\*

**REGISTRATION LIST**

Church Name:		City & Phone Number:		
<b>Campers</b>				
NAME	ADDRESS / ZIP	PHONE NUMBER	SEX	GRADE COMPLETED
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

# Central Area — Christian Church in the Southwest

## Registration Form 2009

**Chi Rho Camp**  
July 12-17

**REGISTRATION INSTRUCTIONS:**

1. Mail one copy of this form, a Registration/Camper Health form for each camper, Counselor Application/Health form for each counselor applicant, and one check for all registrants (payable to Central Area) to: Central Area 1420 North Third Abilene, TX 79601 **Please be sure the Health forms are NOTARIZED!**

2. The deadline for registrations to the Central Area office is a May 6 postmark. A late fee of \$10.00 per person will apply after May 5, late/late fee of \$25.00 after June 29, and no registrations will be accepted after July 3.

\*\*\*\*\*

### REGISTRATION LIST

Church Name:		City & Phone Number:		
<b>Campers</b>				
NAME	ADDRESS / ZIP	PHONE NUMBER	SEX	GRADE COMPLETED
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

# Central Area — Christian Church in the Southwest

## Registration Form 2009

**CYF Conference**  
June 7-13

**REGISTRATION INSTRUCTIONS:**

1. Mail one copy of this form, a Registration/Camper Health form for each camper, Counselor Application/Health form for each counselor applicant, and one check for all registrants (payable to Central Area) to: Central Area 1420 North Third Abilene, TX 79601 **Please be sure the Health forms are NOTARIZED!**

2. The deadline for registrations to the Central Area office is a May 6 postmark. A late fee of \$10.00 per person will apply after May 5, late/late fee of \$25.00 after May 25, and no registrations will be accepted after May 29.

\*\*\*\*\*

### REGISTRATION LIST

Church Name:		City & Phone Number:		
<b>Campers</b>				
NAME	ADDRESS / ZIP	PHONE NUMBER	SEX	GRADE COMPLETED
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

# Central Area — Christian Church in the Southwest

## Registration Form 2009

**JYF Camp**  
July 12-16

**REGISTRATION INSTRUCTIONS:**

1. Mail one copy of this form, a Registration/Camper Health form for each camper, Counselor Application/Health form for each counselor applicant, and one check for all registrants (payable to Central Area) to: Central Area 1420 North Third Abilene, TX 79601 **Please be sure the Health forms are NOTARIZED!**

2. The deadline for registrations to the Central Area office is a May 6 postmark. A late fee of \$10.00 per person will apply after May 5, late/late fee of \$25.00 after June 29, and no registrations will be accepted after July 3.

\*\*\*\*\*

### REGISTRATION LIST

Church Name:		City & Phone Number:		
<b>Campers</b>				
NAME	ADDRESS / ZIP	PHONE NUMBER	SEX	GRADE COMPLETED
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

# Central Area — Christian Church in the Southwest

## Registration Form 2009

**New Beginnings**  
July 17-19

**REGISTRATION INSTRUCTIONS:**

1. Mail one copy of this form, a Registration/Camper Health form for each camper, Counselor Application/Health form for each adult family member, and one check for all registrants-including your counselors - (payable to Central Area) to: Central Area 1420 North Third Abilene, TX 79601  
**Please be sure the Health forms are NOTARIZED!**

2. The deadline for registrations to the Central Area office is a May 6 postmark. A late fee of \$10.00 per person will apply after May 5, late/late fee of \$25.00 after July 6, and no registrations will be accepted after July 10.

\*\*\*\*\*

### REGISTRATION LIST

Church Name:		City & Phone Number:		
<b>Adult Counselors/Parents – 1 adult per camper is required</b>				
NAME	ADDRESS/ZIP	PHONE NUMBER	SEX	AGE
1.				
2.				
<b>Campers</b>				
NAME	ADDRESS / ZIP	PHONE NUMBER	SEX	GRADE COMPLETED
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

# Central Area — Christian Church in the Southwest

## Central Area 2009 Camps & Conferences

### **Eighth Grade Youth Conference**

June 28 – July 4

Completed grade 8

Fee: \$302 per camper/\$325 after 6/12

Location: Ceta Glen Camp, Happy, Texas

### **CYF Conference**

June 7-13

Completed grades 9-12

Fee: \$320 per camper

### **JYF Camp**

July 12-16

Completed grades 4 or 5

Fee: \$255 per camper

### **Chi Rho Camp**

July 12-17

Completed grades 6 or 7

Fee: \$279 per camper

### **New Beginnings Camp**

July 17-19

Completed grades 2 or 3

Fee: \$88 per camper/counselor

**SPONSORED BY THE**

**CENTRAL AREA**

**OF THE**

**CHRISTIAN CHURCH (DISCIPLES OF CHRIST)**

Central Area camps are open to all regardless of race, creed, or national origin with a congregation's recommendation.

Central Area camps are held at Lake Brownwood Christian Retreat  
9030 Retreat Road, Brownwood, Texas 76801

**Camp Registration Sunday - April 5th**

Central Area — Christian Church in the Southwest  
**LBCR Challenge Course**  
**2009**

**Informed Consent and Medical Information**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M F  
First MI Last

Address: \_\_\_\_\_  
Street City State Zip

Telephone: Home ( \_\_\_\_\_ ) \_\_\_\_\_ Work: ( \_\_\_\_\_ ) \_\_\_\_\_

Cell ( \_\_\_\_\_ ) \_\_\_\_\_

In case of emergency, notify: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone for above named person: Home ( \_\_\_\_\_ ) \_\_\_\_\_ Work ( \_\_\_\_\_ ) \_\_\_\_\_

Cell ( \_\_\_\_\_ ) \_\_\_\_\_

Have you ever had or do you now have: (Circle all that apply)

Chest Pains High Blood Pressure

Asthma Heart Murmur

Heart Attack - If yes, give date \_\_\_\_\_

Physical Handicap - If yes, explain \_\_\_\_\_

In the last six months have you had any injury, serious disease, or surgery that may impair your ability to participate in the LBCR Challenge Course? If yes, explain:

\_\_\_\_\_

Do you have any other medical condition(s) that the LBCR staff should be aware of:

\_\_\_\_\_

**Participant Requirements**

- No open toe shoes or sandals are allowed.
- No jewelry is allowed during program activity. Injury or personal loss may occur.
- Remove all potentially dangerous items from pockets and clothing.
- I am not under the influence of any chemical substance or alcohol.
- Understanding that physical activity involves risk of injury, I understand that my participation in the LBCR Challenge Course is entirely voluntary. I release LBCR, its employees, staff and governing bodies from any claims or liability arising out of my participation.
- By signing, I agree to abide by participant requirements.

**Hold Harmless Clause**

I (the undersigned participant) shall indemnify, hold harmless, assume liability for and defend LBCR and its affiliates, employees, staff, governing bodies, and directors from any and all costs, court costs, and all other sums which LBCR, its affiliates, employees, staff, governing bodies, and directors may pay or become obliged to pay on account of any, all, and every demand for claim or assertion of liability, or any claim or action founded thereon, arising or alleged to have risen out of use of real or personal property belonging to LBCR, its affiliates, employees, staff, governing bodies, and directors, or by any action or omission by myself.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If the participant is under the age of 18, parent or guardian must sign below.

Signature of parent or guardian: \_\_\_\_\_ Date: \_\_\_\_\_