



INFORMATION AND INSTRUCTIONS

CAMP TIMES Check-in for all camps is from 4 pm to 5 pm on the first day of camp. Pick up is 4:00 for Tadpole, Senior High, Junior High and Back-to-School. A note will be sent home for Kids Zone and Camp Blast.

FREE CAMP Did you hear that your camper can earn free camp registration? It's all true. For each new registered camper, referred by your student, who has never attended a camp at YCL, your camper will earn 25% off of his/her 2017 registration—up to 100% free! New students, referred by your child, will also receive 25% off their 2017 registration fees.

FAMILY DISCOUNT Multiple campers in the same family are still eligible to receive a family discount. The first camper will pay full price. You will receive 25% off of the registration fee for additional campers from the same family, regardless of camp attending. Tadpole campers will not be the full priced student, unless all campers are attending that camp.

WHAT'S INCLUDED Included in the camp fee are a t-shirt, all meals, 2 snacks per full day of camp, a free DVD. The DVD will be sent to you over the summer.

ZIP LINE All campers will have the opportunity to use one of our zip lines, unless parents request otherwise. Our Jr. Zip line will be available for campers under 4½ feet tall. The big zip line will be available for older students, the use of which will require a separate authorization and release signed by a parent or guardian. No one will be forced to use either zip line.

WHAT TO BRING Campers should bring play clothes that can be easily replaced if stained or torn during activities. Other items to pack include: bedding (sleeping bag, pillow, blanket), towels, rain poncho, toiletries, Bible, notebook, pencil, medicine in original containers (will be kept in first aid station), flashlight, bug spray, sun block, a jacket or sweatshirt and pants for cool evenings, and a swim suit (one piece for girls please). Campers may also want to bring one nice outfit for a special dinner during the week. Bring extra shoes.

WHAT TO LEAVE HOME Please leave personal electronic devices such as phones, mp3 players and tablets at home. In case of emergency parents can contact the camp office by phone or email. Do not bring weapons, drugs or alcohol. Students who bring weapons, drugs, or alcohol will be sent home.

TSHIRTS We will do our best to ensure that your student receives the size t-shirt requested for all campers registered by the early bird deadline - May 20. Students registering late may not be able to receive the size T-shirt they prefer.

SNACKS WILL BE AVAILABLE TO PURCHASE.

REGISTRATION FORMS The following 3 pages are to be filled out and returned to the camp along with payment for registration. These include the camper information form, waiver form, and health form. **Please note that a pastor or authorized official at your church must sign the information form if your student is to receive a scholarship from your church.** All forms must be completely filled out. All registrations post-marked by May 20 are eligible to receive early bird fees. **MAIL THE COMPLETED FORMS TO:**

BEFORE APRIL 15: Rev. Diana Graves
933 Yorktown Rd
Decatur, IN 46733

AFTER APRIL 15:

Rev. Diana Graves
YCL Ministries
6750 W 900 S
Claypool, IN 46510



CAMPER INFORMATION

Name (Last): (First): Phone: Street Address: City: State: Zip: Birth Date: Grade in Fall: Age: Gender: T-Shirt Size: Camper Email: [Would you also like a hoodie for an additional \$35?] Yes: No: Referred By:

Parent Information

Parent Name: Email: Phone (Home) (Cell): (Work): Who may pick my child up from camp: Who may NOT pick my child up:

Church Information

Church Name: City/State: To receive scholarship? Yes No If yes, how much? Authorized Signature/Title:

Desired Camp (Please Check)

Registration and payment must be received by date given to receive early rates.

Table with 3 columns: Camp Name, By May 20, After May 20. Rows include Tadpole Camp, Kids Zone Camp, Camp Blast, Junior High Camp, Senior High Camp, and Back-to-School.

Bunkmate Request: (1) (2)

Cost: Registration Fee(s) Church Scholarship***Check from church due on arrival Extra \$35 fee for hoodie Total Due

Total Enclosed: \$ Balance due on arrival: \$

Parent/Guardian Signature:

The child listed above has my permission to attend camp at YCL Ministries and participate in all activities. I also understand that YCL may use any and all pictures or video taken of my child for future promotions.



WAIVERS

PLEASE READ, SIGN AND RETURN THE FOLLOWING WAIVERS WITH YOUR CHILD'S REGISTRATION AND HEALTH FORMS.

Camper Name: _____ Date: _____

Public Relations and Resource Development Waiver

I give permission for the use of any photograph, video, or art work taken of or produced by my child in interpreting/promoting Yellow Creek Lake Ministries programs to the public.

Parent/Guardian Signature: _____

Medical Treatment Waiver

I understand that, in the event that medical treatment is required, every effort will be made to contact me. However, if I cannot be reached, I give my permission to the camp staff to secure the services of a licensed physician to provide the care necessary, including anesthesia, for my child's well being. I also understand that I and/or my insurance company are responsible for payment of the medical costs incurred.

Parent/Guardian Signature: _____

Activities Waiver

I understand that my child's participation in camp at Yellow Creek Lake Ministries may include activities such as, but not limited to, sports, zip line, archery, swimming, hiking, running, climbing and other activities. I give my child permission to engage in all youth camp activities unless I communicate a restriction in writing to day camp staff in a timely manner.

I wish to place the following restrictions on my child's activities:

Parent/Guardian Signature: _____

I understand my child will be sent home if his/her behavior endangers the health or welfare of others, disrupts camp activities, or is otherwise deemed inappropriate by camp staff. If my child must return home, I will arrange transportation within a reasonable time specified by camp staff.

Parent/Guardian Signature: _____



REQUIRED HEALTH INFORMATION

Camper Name: _____

Emergency Contact Name: _____

Relationship: _____

Daytime Phone: _____ Cell: _____

Name of Primary Physician: _____ Phone: _____

Insurance Company: _____ Policy Number: _____

Group Number: _____ Policy Holder Name: _____

Please attach a copy of your insurance card to this form. Copy both sides of card, if necessary.

Special Dietary Needs:

General Health History: Put an X on any "yes" answers, please explain on back of form. Has/does s/he:

- 1. Recently been hospitalized? 2. Ever had surgery? 3. Recurrent/chronic illnesses? 4. Recent infectious disease? 5. Had a recent injury? 6. Asthma/breathing problems? 7. Recent fainting or dizziness? 8. Faint/pain during exercise? 9. If female, have problems with menstruation? 10. Sleeping problems? 11. Have any skin problems? 12. History of diarrhea/constipation? 13. History of bedwetting? 14. Traveled out of the USA in the past year? 15. Had seizures? 16. Had chronic headaches? 17. Wear glasses/contacts/protective eyewear? 18. Ever been treated for ADD or ADHD? 19. Ever been treated for behavioral or eating disorders? 20. Been seen for mental/emotional concerns? 21. Other concerns that may affect camp life?

Medication: Please fill out if camper will be taking daily medications. Remember all medications must be in their original containers with their name and instructions on how medication is given. All medications will be turned in to the first aid administrator at check in. Additional medications may be listed on back of page.

Table with 6 columns: Name of Medication, Date Started, Reason, Time Administered, Dose Given, Administered How?

List any medications the camper may not receive:

Parent/Guardian Signature: _____