Application for Nazarene Youth Camps: **2017** - **“MIDDLE SCHOOL CAMP ONLY”**

**(Includes Students entering 6th Grade thru those finishing 8th Grade)**

### July 17– July 21, 2017

**“Ace Adventure” waiver *(Required for all campers)***

***Pre-registration is required* for participation in special River Event**

**Note: *There is extra cost to the camper for River Activity (See “Camp Fees” for details)***

**(Pre-registration due July 10, 2017)**

***Mail to:*** Rev. Ollie Parsons, 102 Dunn Ave., Man, WV 25635

***Questions:*** (304)583-7503; ***email:*** opdp1122@suddenlinkmail.com

Camper’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade: \_\_\_\_\_ M \_\_ F\_\_

Camper’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/ST/Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email (if available): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Camper’s Pledge:** I have read the camp rules and will abide by them. I will give full cooperation to my camp director and staff. I realize that if I do not comply with these rules, it will result in my being sent home from camp.

**Camper’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### Parent / Guardian Approval, Waiver of Claim, and Medical Permission

Is the applicant allergic to any medication? Y / N If so, what medication(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check if the applicant has (has had): \_\_Asthma; \_\_\_ Epilepsy; \_\_\_ Heart Trouble; \_\_\_ Rheumatic Fever; \_\_\_ Diabetes

General physical condition of the applicant is; \_\_\_ Good; \_\_\_ Poor Should the applicant participate in sports? Y / N

***All medication MUST be in the original container and will not be administered otherwise.***

***All medication will be documented and administered by state licensed medical personnel.***

**Please provide the following insurance coverage information:** Is the applicant covered by Health Insurance? Y/ N If so, what is the company name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PolicyNumber:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Please make a copy of insurance card and attach the copy to this registration form)**

I hereby approve of the application to Nazarene camp and certify to the correctness of information provided and expressly waive any and all claims against the West Virginia North District or West Virginia South District Church of the Nazarene, or any of the District Boards or it’s representatives because of injury or other damages that may be incurred to named applicant or said applicants in connection with our incident to the Church of the Nazarene Summer Camp program at Summersville, WV.

I have read all the information on this application, including the rules and what my child is to bring to camp. I give my permission for the applicant to attend camp. I will come, upon request of the director in case of disciplinary action to take the applicant home. I give permission to the West Virginia North District / West Virginia South District Camp to use any pictures or video, taken during camps to be used for promotional materials, published articles, or Nazarene websites.

**Parent / Guardian Approval Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

##### Pastor’s Recommendation:

I have read the application above and to the best of my knowledge, this applicant is registering in the proper camp according to their grade level. I have discussed the camp rules with the camper and believe they will abide by them. I give my recommendation for this applicant to attend the camp to which they are applying.

**Pastor’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Pastor/Associate of the church listed below)

**Church:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Church Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Release Form for Media Recording

I, the undersigned, consent and agree that Summersville Nazarene Camp, its employees, or agents may take photographs, video, and other image & sound based media of activities including camp attendees, employees, students, and visitors while on the grounds.  I understand that there will be no financial or other remuneration for recording camp activities, either for initial or subsequent use such images in publications, advertising, and presentations.  Usage shall not include distribution to other agencies or commercial publications.

**Signature of Parent or Guardian:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(PAGE 1 OF 3 – ALL PAGES REQUIRED)**

**Camp Fees: $145.00\* $165.00\***

**Pre-Registration Fee (*Does not include River*) Day of Camp Registration (*Does not include River*)**

This form, Ace Adventure Waiver, and check must Bring this form, Ace Adventure Waiver, and check

be submitted by the pre-registration date listed. to the registration area on the first day of camp.

**\*Camp T-Shirt and Group picture is included in the Camp Fee.**

**Extra Pre-registered cost for special event is: *(Check if participating)* \_\_\_ River Rafting - $20.00**

***(This amount must be paid in advance along with the Regular Camp Fee for camper to participate in the event)***

**Checks:** Make all checks payable to **NAZARENE YOUTH CAMPS**

**Refunds:** A refund of $50.00 will be given to any camper who goes home on Monday before the evening meal. There will be no refund of camp fees after the evening meal on Monday There will be no refund of camp fees for those sent home due to disciplinary action. All refunds are at the director’s discretion. (“No-shows” get full refund.)

**Discrimination:** “In the operation of the Summer Food Services Program, the same meal will be available to all enrolled children without regard to race, color, handicap, sex, age, or national origin, and there will be no discrimination in the course of the meal service. Persons who feel they have been discriminated against should write the Secretary of Agriculture, Washington DC 20250.”

(Office Use Only: \_\_\_\_RIVER)

**Nazarene Youth Camps Information:**

**Personnel:** Counselors and staff members are carefully chosen, consecrated Christians, including pastors and laymen. Every Nazarene pastor is encouraged to participate in camp by working in some capacity unless providentially hindered.

**Health:** A nurse will be on duty at all times. Supplemental insurance is provided for each camper.

Applicant’s primary insurance company is to be used under medical information.

**Recreation:** Activities, sports, and recreation will be age group appropriate for each camp.

**Lodging:** All campers are required to be lodged in the assigned dorm rooms.

**Dress:** Modesty is our rule. Campers are to be neat and clean for all worship services and evening meals. Campers displaying extreme variation from modesty will be asked to change. The camp director of each camp will have discretion over the appropriateness of dress. Shirts and shoes must be worn at all times outside the dorms. Prohibited clothing items include muscle shirts, tank tops, offensive logos or sayings, fish net shirts, see through or similar material.

**Food:** Well balanced meals will be prepared by qualified dietitians.

**What to Bring:** Sleeping bags or sheets and blanket, pillow, towels, wash cloths, personal grooming aids, dress

clothes, recreational clothing, bathing suits, swim shoes (or old tennis shoes), pajamas, robe,

umbrella or raincoat, ball glove, camera, Snack Bar money, and great expectations.

**Special Needs:** Please provide information concerning any special conditions / needs the camper may have. All special needs issues will be kept confidential.

**Arrival Time:** All campers should be on the campgrounds by **Noon** Monday. Lunch will be the first meal served.

**Departure Time:** All campers should be picked up by **Noon** on Friday.

**(PAGE 2 OF 3 – ALL PAGES REQUIRED)**

**CAMP RULES (*Signatures Required below*)**

The camp is owned and operated by the West Virginia North and South Districts Church of the Nazarene, for the Glory of God, the proclamation of the gospel of Jesus Christ, emphasizing Holiness, Evangelism, the preservation of the faith delivered to the saints the growth and strengthening of the Church of the Nazarene, especially it’s ministry to youth.

1. No smoking or using tobacco products in any form, (including e-cigs), drinking of intoxicating beverages,

unauthorized use of drugs in any form on camp property.

(Any medications must be registered with the Camp Nurse.)

1. There is to be no sexual immorality on campgrounds.
2. All campers are expected to conduct themselves in a Christlike manner.
3. Loud, boisterous rowdy conduct shall not be permitted at any time.
4. Cell Phones, Ipods, Video Games, etc. will be confiscated if abused.
5. All campers assigned a room must use that room.

7. Under no circumstances, will males be permitted in the ladies dorm area, nor females allowed in the

men’s dorm area.

8. No explosive materials, fireworks, firecrackers, etc. are permitted on the campground.

9. Dress - Modesty is our rule:

a. Both male & female are to dress modestly & appropriately at all times while on camp property.

b. T-shirts are to be worn over swimsuits during swimming, lake and river activities

c. All campers are to wear shirts at all times outside of the dorms.

d. Shoes are to be worn at all times.

e. Campers are expected to dress neat & clean for all worship services and meals.

f. Sun dresses, halter tops, tank tops, and muscle shirts are unacceptable unless you wear a jacket or

shirt over them.

10. Any damage to property will be charged to the offender.

11. Attendance is required at all classes, services, and sporting activities.

12. Public display of affection will be limited to holding hands.

13. We have a zero tolerance for bullying.

If discipline merits a camper being sent home, the camper will be suspended one year from all campground activities including Singspiration, Family Camp, Assemblies and their age appropriate camp the following year. ***Camper is permitted to participate in Family Camp only with direct supervision of a parent or guardian.***

If disciplinary action is taken to merit sending a camper home, the Camp Director will notify in writing; Parents/Guardians, Pastor, District Superintendents, and appropriate Camp Director for the next year.

Signatures below indicate rules have been read, understood and agreed to:

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

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(PAGE 3 OF 3 – ALL PAGES REQUIRED)**