



**CAMPER REGISTRATION FORM**  
**COMMUNITY OF CHRIST MID-SOUTH MISSION CENTER**

Schedule/Registration for 2010 Summer Camps

Please check the camp you will be attending. **This form must be completed in its entirety (with copies of insurance cards, dates of immunizations or a copy of health card) (camper must reach age requirement by September 1, 2010)**

**Make checks payable to *Community of Christ*. Mail registration forms and feesto:  
Fran Mazzaferro, 3220 Bell Road, Nashville TN 37214  
All camp registrations are due with a \$25 non-refundable deposit by May 1<sup>st</sup>**

**T-Shirt Size \_\_\_\_\_ Youth/Adult (circle one)**

\_\_\_\_ Senior High Camp (June 2-6) FEES: Pre-Registered \$160 After May 1<sup>st</sup> \$175  
Registration begins at 2:00 p.m. Camp Closes at 10:00 a.m. (Ages 15, 16, 17, 18)

\_\_\_\_ Junior High Camp (June 6-10) FEES: Pre-Registered \$160 After May 1<sup>st</sup> \$175  
Registration begins at 2:00 p.m. Camp Closes at 10:00 a.m. (Ages 12, 13, 14)

\_\_\_\_ Early Junior Camp (June 12-13) FEES: Pre-Registered \$60 After May 1<sup>st</sup> \$80  
Registration begins at 10:00 a.m. Camp Closes at 12:00 p.m. (Ages 7, 8)

\_\_\_\_ Parents of Early Jr Campers\* (June 12-13) FEES: \$25  
\*(A class for the parents will be offered during this time)\* **Parents will need to complete a form too!**

\_\_\_\_ Junior Camp (June 13-15) FEES: Pre-Registered \$100 After May 1<sup>st</sup> \$120  
Registration begins at 2:00 p.m. Camp Closes at 10:00 a.m. (Ages 9, 10, 11)

**GENERAL INFORMATION**

Camper's name: \_\_\_\_\_ Social Security Number \_\_\_\_\_

DOB \_\_\_\_\_ Age \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Grade Completed in School \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

E-mail address \_\_\_\_\_

Congregation/Church Attending \_\_\_\_\_ Stake/Mission Center \_\_\_\_\_

Name of Parent/Legal Guardian \_\_\_\_\_

Social Security Number \_\_\_\_\_ Work Phone(\_\_\_\_) \_\_\_\_\_ Home Phone(\_\_\_\_) \_\_\_\_\_

Additional Parent/Legal Guardian or next of kin \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone(\_\_\_\_) \_\_\_\_\_ Cell phone(\_\_\_\_) \_\_\_\_\_

Person(s) allowed to pick up your child from camp: \_\_\_\_\_

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**Who to Contact in Case of Emergency**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

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Medical Information

1. Allergies to foods, medication, etc. (if none, so state)\_\_\_\_\_
2. Is camper presently under a physician’s care for any acute or chronic medical condition? (If so, please explain. If none, please so state)\_\_\_\_\_
3. Does camper carry non-prescription medication on their person? (If none, so state)

Medications and purpose \_\_\_\_\_

4. Does camper require prescription medications? (If none, so state)  
Medications and purpose \_\_\_\_\_

5. Family Physician \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Office Address \_\_\_\_\_

6. Hospital/Clinic of Choice (If applicable) \_\_\_\_\_

7. Health Insurance Company \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Policy holder’s Name \_\_\_\_\_

Address \_\_\_\_\_

Group No. \_\_\_\_\_ Policy No. \_\_\_\_\_

PLEASE ATTACH A COPY OF YOUR INSURANCE CARD

8. Has the individual recently been exposed to a contagious disease? (If “yes”, describe. If “no”, so state) \_\_\_\_\_

9. Does individual have problems in any of the following areas? (Circle those that apply)

- |          |              |               |             |
|----------|--------------|---------------|-------------|
| Vision   | Hearing      | Hernia        | Fainting    |
| Diarrhea | Constipation | Sleep Walking | Bed Wetting |

10. Recent emotional upset (death of family member/friend, divorce/separation of parents, other loss, etc.)? \_\_\_\_\_

11. Any other medical, emotional, psychological problems, dietary regime, or physical restrictions? (If yes, please describe) \_\_\_\_\_

Has camper ever had any of the following? (Please check if yes and provide month and year of latest occurrence)

Anemia_____	Appendicitis_____	Asthma_____	Bronchitis_____
Diabetes_____	Chicken pox_____	Epilepsy_____	Frequent Colds_____
Fractures(describe)___	Heart Trouble_____	Heart Murmur_____	HIV_____
Hepatitis_____	Mumps_____	Pneumonia_____	Kidney Trouble_____
Rheumatic Fever_____	Sinusitis_____	Sore Throat_____	Measles_____
Scarlet Fever_____	TB_____	Whooping Cough_____	Other_____

Please list camper’s major operations or serious injuries (describe and give dates): \_\_\_\_\_

**Please list camper’s immunization dates for the following (or attach a copy of health card):**

DPT_____	Booster Diptheria_____	Booster Tetanus_____	Smallpox_____	Mumps_____
Typhoid_____	TB_____	Measles_____	Polio_____	Other_____

**Permission for Medical Treatment**

I, the undersigned, being the parent, legal next of kin, or guardian of \_\_\_\_\_  
Hereby authorize any necessary medical treatment for this person. I also guarantee payment of all charges incurred during this medical treatment. (Physician, hospital, x-ray, lab, drugs, ambulance, etc.)

Parent / Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Photo release**

In consideration of the right of \_\_\_\_\_ (child's name) to participate in this activity, I hereby give consent to and authorize the taking of photographs or videotape in which my child may appear. I hereby waive all right of privacy in and to any said pictures or tapes.

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Activity Consent**

I specifically consent to \_\_\_\_\_ (child's name) participating in activities offered by the Mid-South Mission Center Camp, including but not limited to camping, boating, swimming, hiking, and sporting events. I have marked through any items from the preceding list to which I do **not** give consent for participation. I specifically do **NOT** want the camper to participate in the following activities: \_\_\_\_\_

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

**LIABILITY RELEASE**

The undersigned parent, legal guardian, next of kin, or participant acknowledges that even though every effort is made to provide a safe, accident-free environment, incidents may occur. In consideration for being accepted by the Community of Christ, Mid-South Mission Center, for participation in this event, we (I), being 21 years of age or older, do for ourselves (myself) (and on behalf of my child-participant, if said child is not 21 years of age or older) hereby release forever discharge and agree to hold harmless the aforementioned camp and Community of Christ and the directors thereof from any and all liability, claims, or demands for personal injury, sickness, or death, as well as property damage and expenses of any nature whatsoever which may be incurred by the undersigned and the child-participant that occur while said child is participating in this event. Furthermore, we(I) (and on behalf of our (my) child-participant if under the age of 21 years) hereby assume all risk of personal injury, sickness, death, damage, and expense as a result of participation in recreating and work activities involved therein. Further, authorization and permission is hereby given to said organization to furnish any necessary transportation, food and lodging for this participant. The undersigned further agrees to hold harmless and indemnify said organization, its directors, employees, and agents, for any liability sustained by said organization as the result of negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto. **Both parents must sign unless parents are separated or divorced, in which case custodial parent must sign. \*\* Only applicant must sign if 21 years of age or older.**

Parent/Guardian

Applicant/Signaure\*\* \_\_\_\_\_ Date \_\_\_\_\_ SSN \_\_\_\_\_

Parent/Guardian

Applicant/Signaure\*\* \_\_\_\_\_ Date \_\_\_\_\_ SSN \_\_\_\_\_

**SPECIAL INFORMATION**

It is the desire of the Youth Camping Program for all campers to attend the entire camp. If you are unable to attend the entire camp according to the start and end dates, you must make arrangements prior to the start of the camp with the director.

Visitor Policy – We have a no-visitors policy at our youth camps. If it is necessary for anyone to make a visit, prior arrangements must be made with the director.

Each camper should bring bedding materials, clothes, bath towels, shampoo, soap and etc. to live at the campground for the specified number of days of the camp.

Swimsuit policy – Please, bring appropriate swimming attire consistent with a church sponsored activity.

Campers are not allowed to bring food, snacks, radios, stereos, computers, games, illegal substances or weapons to the church camp. Any such items will be confiscated and given back at the end of the camp. Meals, snacks and water will be available at appropriate times.

**ALL JUNIOR HIGH AND SENIOR HIGH CAMPERS AND PARENTS/GUARDIANS ARE REQUIRED TO SIGN THE EXPECTATIONS OF CONDUCT ON THIS FORM.**

We have confidence that all campers and counselors in training (CITs) desire to have a positive and spiritual experience with their peers and will, therefore, abide by all camp rules. If a camper or CIT chooses not to abide by the camp rules, parents will be notified and must make arrangements to have the child picked up immediately.

Community of Christ

Mid-South Mission Center  
Expectations of Conduct  
Junior High & Senior High Campers

The Mid-South Mission Center Youth Council, Camp Directors and Staff are committed to providing a *safe* environment for our young people where they are free to worship and fellowship. The following, "Expectations of Conduct" must be read and signed by both *camper* and *parent/guardian* and returned with the Junior High or Senior High camp registration forms. Camper and parent/guardian need to initial each numbered article individually.

Camper/Parent

- \_\_\_\_/\_\_\_\_ 1. All campers are to be registered for their particular camp.  
\_\_\_\_/\_\_\_\_ 2. All participants (campers & leaders) will treat all campers and leaders with respect.  
\_\_\_\_/\_\_\_\_ 3. All leaders will realize that their main responsibility at camp is to provide Christian ministry to and with campers. As such, the interactions between leaders and campers should reflect the trust and respect inherent in this relationship.  
\_\_\_\_/\_\_\_\_ 4. Campers and leaders will arrive at scheduled activities on time.  
\_\_\_\_/\_\_\_\_ 5. Campers are not allowed to leave camp unless arrangements with the Camp Director have been made in advance.  
\_\_\_\_/\_\_\_\_ 6. There is a No Smoking and No Alcohol policy at the Foundry Hill Campground. All participants agree to refrain from using tobacco, alcohol, or any controlled substance at camp. Prescription drugs should be given to the camp nurse upon arrival at camp. The nurse will be responsible for dispensing medications during camp.  
\_\_\_\_/\_\_\_\_ 7. All participants agree to refrain from sexual activities not consistent with a life lived in Christian community, including but not limited to , pre-marital sexual intimacy.  
\_\_\_\_/\_\_\_\_ 8. All participants agree to refrain from abusive language including swearing and racial statements as well as other language that may promote hatred towards any group or person. Swearing includes, but is certainly not limited to the use of the name of God, Jesus or Christ, in a demeaning or irreverent manner.  
\_\_\_\_/\_\_\_\_ 9. All participants will wear clothing appropriate to a Christian camping activity.  
\_\_\_\_/\_\_\_\_ 10. All participants will wear shoes at all times outside the cabin.  
\_\_\_\_/\_\_\_\_ 11. Campers will not be in a cabin unsupervised.  
\_\_\_\_/\_\_\_\_ 12. Campers will observe rest period in the afternoon as quiet time in their cabin.  
\_\_\_\_/\_\_\_\_ 13. All campers who have a car on the campground during camp will release the keys to the Camp Director and will not have access to the car for the period of camp.  
\_\_\_\_/\_\_\_\_ 14. We have a zero tolerance policy for any type of weapon or simulated weapon. These would include, but not limited to: guns, knives, water guns, etc. If any of these items are brought to camp, they will be confiscated and held by the director until they can be returned to the parent/guardian.

Conduct becoming a Christian is expected at all times by those using the Foundry Hill Campground facility. In the event a camper or staff member acts in violation of established rules or policies, the director at his/her discretion in consultation with another staff member, may require the offender to vacate the grounds. The Mission Center President will be notified at the earliest opportunity of any such actions and a detailed written report of the incident shall be prepared and submitted.

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

Parents/Guardians Signature \_\_\_\_\_ Date \_\_\_\_\_