

2011 CAMP & CONFERENCE
REGISTRATION FORM

for
BEACH CAMP
at Noah's Ark in PCB, FL

Christian Church (Disciples of Christ) in
Alabama-Northwest Florida

Beach Camp Dates
June 10th – June 15th

*Arrival time is suggested at 7p.m.
(a sandwich bar will be offered for the evening meal,
and will be available as groups arrive)*

Departure time is 10 a.m.

Camp is located at:
12902 Front Beach Rd. Panama City Beach, FL

**Beach Camp is for those who have
completed 6th – 12th Grades**

Cost: \$225.00 -- after June 1st - \$265.00

Please mail this form with your full payment prior to the deadline to:

**CHRISTIAN CHURCH (DISCIPLES OF CHRIST)
IN ALABAMA-NORTHWEST FLORIDA**
861 HIGHWAY 52
HELENA, AL 35080

Photography and Publicity Permission Form

Every camp experience includes a group photograph which is given to all participants, used in a camp display, and posted on our website.

Do you give permission for individual and small group pictures of your youth or child to be taken and posted on our website or used in publicity brochures and posters for future camps? If a choice is not marked, it will be assumed that your child's photo CAN be used for publicity.

(Please check one) Yes _____ No _____

Participant Signature: _____

Date _____

(For all Campers under the age of 18)

Parent/Guardian Signature: _____

Date _____

**Refund Policy for events sponsored by the
Alabama-Northwest Florida Region:**

(Approved by the Regional Board, February 20, 2010)

Refund Policy for events sponsored by the Alabama-Northwest Florida Region: 100% refund for emergencies, provided that notification is received prior to the beginning of the event; 50% refund for emergencies in which notification(written) is made after the beginning of the event; 100% refund for non-emergencies if requested in writing at least seven days prior to the first day of the event; No refunds will be given for non-emergency cancellations after seven days prior to the beginning of the event. Written requests for refunds must be received by the Regional Office, 861 Highway 52, Helena, AL 35080 (email: alnwf@aol.com), within seven days of the last day of the event.

While refunds are not available other than as outlined in this policy, substitutions will be allowed as long as the original registrant, or responsible adult, is able to locate an eligible participant who is able to take the slot and as long as the original registrant, or responsible adult, communicates this information to the Regional office. The Region will not be responsible in assisting in identifying a substitute. Notification should be provided to the Regional Office as soon as possible and any substitute must complete the necessary paperwork prior to arrival at the event.

PARTICIPANT'S INFORMATION – Please Print

First Name & Middle Initial _____

Last Name _____

“Preferred Name” _____

Gender: Male / Female Age _____ (At start of Camp)

Grade (just completed) _____

Birth Date _____/_____/_____

Church Name: _____

Camper's Home Address: _____

City _____

State _____ Zip _____

Camper's E-mail Address: _____

Camper's Home Phone (_____) _____ - _____

Camper's Cell Phone (_____) _____ - _____

Parent/Guardian Name _____

Parent/Guardian's E-mail Address _____

Work Phone (_____) _____ - _____

Parent's Cell (_____) _____ - _____

Parent's Signature: _____

Sponsoring Minister's Signature: _____

**2011 COVENANT for Campers
CHRISTIAN CHURCH (DISCIPLES OF CHRIST)
IN ALABAMA-NORTHWEST FLORIDA**

Please read (or have read to you) the following. Sign this covenant, obtain parent signature and mail with completed camp registration form and appropriate fees. Thank you for your help!

- I will come to camp expecting to grow in my faith and in relationship with others, becoming a special part of the camp community. In order to do this, I covenant to follow all the rules and guidelines set by the Christian Church in Alabama Northwest Florida and any others set for this event. With this, I commit myself to the following: To be on time, attend and be attentive for all camp/conference activities and participate in them fully
- Have fun and make sure everyone else has a great time
- To respect each other regardless of age and to respect others' feelings and thoughts
- I will not go from adult to adult until I get the answer I want
- Be myself and open to making new friends
- Be inclusive at all times
- Cooperate with the counselors, keynoter, director and other staff members at all times
- Be respectful of God's beauty in this special place and only leave footprints behind
- To take all that I learn about God and share it with my friends, family and church

The Summer Camping Program Policies includes:

- Participants are expected to remain for the entire event. No one should expect to arrive late or leave early without prior permission from director. The only visitors will be those invited prior to camp by the director.
- No one, including counselors, will leave the camp without special arrangements with the director.
- All cars will be parked for the duration of the event. Keys will remain in the possession of the director.
- Events for youth in Alabama-Northwest Florida are "smoke free".
- Possession or use of intoxicating beverages, drugs or marijuana is prohibited. Violators will be sent home.
- Stewardship of camp property is important. Camp must be left in as good or better shape than it was found upon arrival. Repair of damage to property will be paid by the person(s) responsible.
- Food must be kept out of the dorm area. If you have special foods, arrangements can be made with director.
- Dorms are off limits to members of the opposite sex.
- Offensive, insensitive and foul language is not acceptable.
- Pagers and Cell Phones are not permitted. If you must bring one to camp – You must turn in to the director

Camper/Conferee Signature

Parent/Guardian Signature
(MUST BE SIGNED REGARDLESS OF AGE)

**THIS COVENANT MUST BE COMPLETED TO
PROCESS YOUR REGISTRATION.**

**2011 MEDICAL INFORMATION AND RELEASE
MEDICAL HISTORY**

Please answer with (yes or no):

- _____ Do you have any health problems?
- _____ Are you currently under the care of a physician or psychologist?
- _____ Do you require handicapped-accessible facilities?
- _____ **Do you have any food or other allergies?**
- _____ Do you expect to have any difficulty with normal event activities?
- _____ Do you take any prescription medication?
- _____ Will you allow appropriate over-the-counter medications to be given as needed?

(If "YES" To Any of the Above Questions, Please Explain Below or attach a separate letter describing the camper(s)' health situation)

Detail Any Special Medical or Other Concerns

(if more room is needed, please attach a sheet to this form)

SIGNATURE, AGREEMENT AND RELEASE:

In case of emergency, I hereby give permission to the physician selected by the camp director to hospitalize, order injections, anesthesia or surgery for the child named above in order to secure necessary, proper medical care. I understand that I will be contacted immediately in the event that something unforeseen happens requiring my attention. I release the Noah's Ark staff and management, camp directors and counselors, and the Christian Church (Disciples of Christ) in Alabama-Northwest Florida and its staff, from all responsibilities in case of sickness or accidents causing injury occurring during camp. I have provided proof of insurance to those in charge.

Signature of Parent/Guardian
(Signature required regardless of age of camper)

Emergency Contact(s) Name & Phone Number:

Verification of Insurance:

Name of Insurance Company, Address and Telephone Number

Member Name Member ID

**THIS MEDICAL FORM MUST BE COMPLETED TO
PROCESS YOUR REGISTRATION.**