

DRESS CODE

CLASS & ACTIVITY TIME FOR GIRLS AND WOMEN: Dresses, skirts, or split skirts that cover the knees or full-length jeans or slacks. Blouses, shirts or sweaters must be full length covering the shoulder and midriff. No spaghetti straps, tank tops, etc.

WORSHIP TIME FOR GIRLS AND WOMEN: Dresses or skirts that cover the knees. Blouses, shirts or sweaters must be full length covering the shoulder and midriff. No spaghetti straps, tank tops, etc.

CLASS, ACTIVITY, & WORSHIP TIME FOR BOYS AND MEN: Full length jeans or slacks. Shirts are to be full length and cover the shoulders and midriff. No fishnet, tank tops, or muscle shirts.

EVERYONE IS ENCOURAGED TO LOOK HIS/HER BEST FOR WORSHIP.

SPECIAL NOTE CONCERNING DRESS – All garments should be loose fitting.

SPECIAL NOTE CONCERNING CELL PHONES – Campers may not bring cell phones or any other electronic device to camp.

Please read the rules and sign your name on the following line. By doing so, you agree to abide by all of the camp rules.

Signature of Camper

Signature of Parent / Guardian

Cost for tuition, food and housing will be as follows:

All campers, if pre-registered by deadline \$75.00
A \$10 late fee will be added for late registration
Workers and sponsors \$35.00
Children under 7 yrs. (must be accompanied by a parent/guardian) \$10.00

2010 Camp Dates

Teens Group 1 June 6-11
Teens Group 2 June 13-18
Pre-teens Group 2 July 25-30
Pre-teens Group 1 Aug. 1-6

Associations in Group 1

Greater Springfield, Indian Creek, Central Western, Mission, cave Springs, Liberty, Mo-Ark, Niangua, Laclede

Associations in Group 2

Greater Kansas City, South Central, Northeast, St. Louis, St. Francois, Mid-Rivers, Bootheel, Northwest

Statement from the Camp Board – We are looking forward to this camp session and to the best of our ability, we will seek to provide a safe Christian atmosphere for all who attend. It is our prayer that many young people will come to the Lord and go forth to serve in their local churches and regions beyond.

2010 REGISTRATION AND EMERGENCY MEDICAL FORM

Camp Niangua Free Will Baptist Youth Camp
7627 State Hwy. M, Niangua, MO 65713
417-473-6444

PRE-REGISTRATION DEADLINE-TEENS: MAY 16; PRE-TEENS: JULY 4

You may register online at www.campniangua.com

Please print legibly

Date: _____

Name: _____ Age: _____

Address: _____ Gender: M F

City: _____ State: _____ Zip Code: _____

Church: _____ FWB? ___ Yes ___ No

If not, what FWB church have you come with? _____

Camp t-shirts will be available with this year's theme: "GO ONE" (based on Matthew 5:41) Price = \$12.00 (in addition to the registration fee). If you would like to purchase a shirt, please circle size:

ADULT: S M L XL XXL CHILD: S(6-8) M(10-12) L(14-16)

Have you been treated by a physician within the past 6 months? _____

Brief nature of treatment _____

Are you presently taking medication? _____ Do you have it with you? _____

Are you allergic to any medication? _____ If so, please list _____

Do you have allergies to weeds, pollen, insects, etc.? _____ If so, please list below _____

Please Note – all medication of campers will be stored at the First Aid Center and dispensed by the camp nurse. This is done to insure the safety of your child and others.

IMPORTANT MEDICAL NOTE: In the event of a medical emergency, a Youth Camp Representative will try to contact the parents/guardian of the camper. However, there are times when this is not possible. For this reason the parent/gardin is required to fill out the EMERGENCY MEDICAL STATEMENT on the next page. No camper will be admitted without this information.

We are required by law to collect the following information regarding race/ethnic identification. Please check one: American Indian or Alaskan native _____; Asian or Pacific Islander _____; Black _____; Hispanic _____; White _____

EMERGENCY MEDICAL FORM

No child will be admitted to camp without the following information filled out and signed by parent/guardian.

EMERGENCY MEDICAL STATEMENT: I, _____
(parent/guardian), by my signature below, hereby authorize the Youth Camp Board, or representative(s) to secure emergency treatment necessary to maintain the life or health of my child whose name appears on this form. I am signing this statement in the presence of a witness, and by my signature, I authorize the attending physician and/or hospital staff to treat my child for any injury or condition that would threaten his/her life or well being.

Parent/Legal Guardian of Camper
Witness Information: I, _____, do hereby promise that I have seen the parent/legal guardian read and sign the above EMERGENCY MEDICAL STATEMENT and that the signer is indeed the parent/legal guardian or the camper. I do further promise that I am an adult and of sound mind.

Witness Signature: _____
Name of Family Physician _____
Phone number of Family Physician (including area code) _____
Please list below numbers where you may be reached in case of emergency: _____

SPECIAL NOTE ABOUT CAMP INSURANCE

The Youth Camp insurance carrier is Brotherhood Mutual Insurance Company. The insurance coverage provided by the camp is called Excess Insurance. Here is a brief description of coverage:

1. Coverage is **ONLY** for accidents. There is no coverage for sickness.
2. Should an accident occur, all charges must first be submitted to the camper's personal/private insurance carrier.
 - a. If the personal/private insurance carrier has a deductible, Camp Insurance will pay this deductible, not to exceed its limits.
 - b. If a balance exists after the personal private insurance carrier has paid to its limit, Camp Insurance will pay unpaid balance, not to exceed limits set by Brotherhood Mutual.
 - c. If there is no personal/private insurance, Camp Insurance shall serve as primary carrier and pay up to its limits
 - d. Brotherhood Mutual will not pay unless all necessary information is provided. Failure to do so will result in personal responsibility for unpaid balance.
3. Since all claims must be first submitted to personal/private insurance company, please give the following information:

Name of personal/private insurance provider: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Policy # _____

If you do not have personal/private insurance coverage, check here: _____

CAMP RULES

1. Anyone who spends the night at camp must first register.
2. Anyone who damages camp equipment or property shall pay for those damages.
3. No one shall bring/use tobacco, narcotics or alcoholic beverages on campgrounds. Those who do so may be expelled from the camp and lose further privileges.
4. Profanity will not be tolerated by anyone on the campgrounds.
5. No one shall move camp items from one place to another without permission from the camp board. Items that are moved must be returned before camp is over.
6. No container or device shall be used to propel or project any substance on another person or property. This includes shaving cream, paint, water balloons, etc. Any damages will be paid for by those responsible. Some water games may be played under the supervision of the Camp Board.
7. No electronic devices are to be brought to camp by campers. This includes cell phones, ipods, mp3 players, televisions, laptops or any other device that shall receive or reproduce voice or music. Musical instruments may be accepted, but first must be approved by the Camp Board.
8. A person must be at least 20 years old before serving as a sponsor.
9. Each church sending boys and girls to camp must provide a sponsor for them.
10. Campers are required to attend all assemblies, classes and worship services. All sponsors and workers are expected to attend evening worship services.
11. No mixed swimming will be allowed. When going to and from the pool, be fully clothed or wear a long bathrobe. A towel draped around the body is not acceptable.
12. No one will be allowed in the swimming pool without a qualified lifeguard.
13. After registering, no one shall leave the campgrounds without notifying the camp director or board member and signing the checkout list.
14. Health regulations require that no unauthorized persons shall be in the kitchen area. No unauthorized person shall take ice from the icemaker in the dining hall.