



Dear Youth and Parents,

Summer Camp 2017 is almost here! We are very excited and hope you are as well! Please be sure to read the following information carefully. This packet contains instructions for registration, packing, bringing medications to camp, making payments, etc. It is possible to register your teen for camp at bethanycentral.org/youth and make your payment via credit card or by mailing/bringing your payment to the Bethany Baptist Church office. Please call the church office at 692-1755 if you have any questions or concerns.

- Please be sure to complete all registration forms included in this packet. You will find deadline and discount information on the Registration Form. Scholarships are available. Please contact Josh Beakley for more information.
- It is important that you complete and sign both the [Lake Geneva Conference Center Waiver](#) and our [Summer Camp Release Form](#) for each child attending camp.

Theme: Our theme this year is **Prayer: How to Talk with God**, focusing on the book of **Psalms**. This theme will be taught by the following: Pastor Ritch Boerckel, Pastor Daniel Bennett, and Pastor Art Georges.

Spending Money: Snacks will be available throughout the week for your teen to purchase. Should your child wish to participate in optional camp activities, there is an additional cost for those activities. They may also have a chance to shop in downtown Lake Geneva. We will be stopping for lunch on our way back from Lake Geneva on Friday. Please encourage your teen to spend their money wisely so they will have enough for that last lunch on the return home.

Dress Code: Modesty is expected from all campers. Encourage your teens to honor Christ through the clothes they choose to bring. Avoid any low cut tops, short shorts, belly revealing shirts, or two piece swim suits. Tankinis that look like a one piece are approved. Ladies that do not own a one piece swimsuit may wear a dark colored T-shirt over their two piece swimsuit. We ask that guys keep their shirts on when not swimming. Thank you!

Insurance: Your family's insurance plan will be the primary coverage for your teen. The camp and church will not be providing any insurance for your teen.

Talent Show: We have an annual Summer Camp talent show! If your teen plans to participate, please encourage them to be appropriate and bring whatever they might need to display their amazing talent.

Sending Mail to Camp: The camp address is *Lake Geneva Youth Camp and Conference Center, W2655 South Street, Lake Geneva, WI 53147*. We suggest that you send any mail early so it arrives while they are there.

Thank you for taking the time to read through this packet. Thank you for believing in what God can do in the lives of our youth through this opportunity. We appreciate your prayers and your support.

In Christ,

Josh Beakley & Aaron Boerckel

2017 Bethany Fellowship of Churches
Summer Camp Registration Form

Name of Child #1 _____ Grade 2016-17: _____

Birth Date _____ Gender: Male ____ Female ____ T-shirt Size (Adult Sizes): S M L XL XXL

Name of Child #2 _____ Grade 2016-17: _____

Birth Date _____ Gender: Male ____ Female ____ T-shirt Size (Adult Sizes): S M L XL XXL

Name of Child #3 _____ Grade 2016-17: _____

Birth Date _____ Gender: Male ____ Female ____ T-shirt Size (Adult Sizes): S M L XL XXL

Parent /Guardian Information:

Parent/Guardian Name(s): _____

Address: _____ City, State: _____ Zip: _____

Home Phone: _____ Parent Cell: _____ Parent Email: _____

Parent #2 Cell: _____ Parent #2 Email: _____

Payment Information

If registering on or before May 14

\$310 per child (including \$50 deposit) \$ _____

Multi-Child Discount
(deduct \$50 per family member attending) Deduct \$ _____

TOTAL DUE: (including \$50 non-refundable deposit) \$ _____

If registering after May 14

\$335 per child (including \$50 deposit) \$ _____

Multi-Child Discount
(deduct \$50 per family member attending) Deduct \$ _____

TOTAL DUE: (including \$50 non-refundable deposit) \$ _____

Payment Enclosed:

Deposit (\$50 non-refundable) \$ _____

Balance Due: \$ _____

-or-

Paid in full (including \$50 deposit) \$ _____

Please make checks payable to Bethany Community Church
(Must pay on-line to pay by credit card)

Summer Camp Release Form

(1 child per form)

Child Name: _____ Parent/Guardian Name: _____

Medical Release (Signature Required)

Many hospitals will not administer any medical attention to a minor without some form of parental consent. This release gives us permission to take your child to the nearest available medical facility for necessary treatment in the event of an emergency. I understand that every effort will be made to contact me. If I cannot be reached, I hereby give Josh Beakley or any agent of Bethany Baptist Church, Living Hope Community Church, or Bethany Community Church (BBC, LHCC, & BCC) the permission to act on my behalf in seeking emergency treatment for my child in the event that such treatment is deemed necessary by BBC., LHCC, & BCC I give permission to those administering emergency treatment to do so using those measures deemed necessary. I absolve BBC, LHCC, & BCC from liability in acting on my behalf in this regard so long as BBC, LHCC, & BCC is not grossly negligent. If a dispute over this agreement or any claim for damages arises, I agree to resolve the matter through a mutually acceptable arbitration process.

X _____ (relationship to child) _____

Insurance Information

Insurance Company: _____ Group # _____

Policy #: _____

Emergency Contact: _____ Phone: _____

Cell Phone Policy

I understand that cell phones may only be used to take photos and contact parents. To ensure APPROPRIATE USAGE, I grant access to my son/daughter's cell phone to BBC, LHCC, & BCC youth leaders.

X _____ (relationship to child) _____

BFC Summer Camp Medications Policy

If your son/daughter is bringing medications to Summer Camp, please read the following policy regarding their medications:

- **All** medications must be turned in at the Summer Camp registration table on the day of departure, before the parent/youth meeting at 1:45pm with the exception of emergency inhalers and epi-pens.
- Each medication must be labeled as to what it is, dosage, and frequency
- Complete a **camp information label** for each medication, both over the counter and prescription meds. These labels will be attached to the medication and contain all necessary information. *Please be sure to prioritize the importance of the medication where asked on the label. More labels are available at the Bethany office.*
- Our camp nurse will be holding and administering medications. To expedite the medications process, remind your teen that they should find our camp nurse at the time they need their meds. Please contact Josh at (661)400-1150 with questions or concerns.

Child Name: _____ is bringing the following medications to camp:

OK to give Over-the-Counter pain reliever (e.g., Ibuprofen, Tylenol) *without* calling parent? Yes No

Allergies: _____

Please return this form with your registration.

Lake Geneva Youth Camp and Conference Center

W2655 South Street
Lake Geneva, WI 53147
(262) 248-5500

Teams Challenge Course, Paintball, Zip Line and Climbing Wall & other Activities Acknowledgement of Risk and Assumption of Responsibility / Liability Waiver / Hold Harmless

LGYC/CC "Stronghold" adventure programs involve a variety of activities that often include warm ups, exercises, activities, group initiative problems, low element challenges and high element challenges like the zip line and climbing wall, among other activities. Participants engage in stronghold adventure activities always by their own choice, so the individual must assume the risk of injury. We do not want you to engage in activities that would be detrimental to your health or which might be opposed by your physician because of illness, injury or surgery. We ask you for the following information so we can be aware of potential problems to better help you safely enjoy your experience. Thank you for your assistance!

Participant's name: _____	Group name: _____
Gender: M or F Birth Date: ___/___/___	Age: _____ Height: _____ Weight: _____
Address: _____ _____	In case of emergency notify: _____
_____	Relationship to you: _____
Home Phone: () _____	Numbers for emergency contact: () _____
Business Phone: () _____	() _____

Please Circle: _____ Specify: _____

Yes No Do you have allergies? (insect stings, drugs, etc.) _____

Yes No Do you take or carry medication? _____

Yes No Medical Conditions? (epilepsy, diabetes, asthma ,etc.) _____

Yes No Any physical conditions that will hinder your participation? _____

I understand that during my participation in the Teams Challenge Course, Paintball, Zip Line or Climbing Wall, Slip-n-Slide, Boating, Swimming or other Activities, I may be exposed psychologically and physically to stressful and challenging situations. I understand, too, that although the program has taken precautions to provide proper organization, supervision, instruction, and equipment for each activity, it is impossible for the program to guarantee absolute safety. I understand and appreciate that there are a number of inherent risks involved in these activities that are beyond the control of the camp or its staff and agree to personally assume such risk. Also, I understand that I share responsibility for safety and I assume that responsibility. Further, I waive any claim that may arise against LGYC/CC or its employees as a result of my participation in the stronghold activity. I accept responsibility for my personal health and verify that I have no physical or psychological problems that would prohibit my participation in the activity. I agree to comply with all instructions and directions of Lake Geneva Youth Camp & Conference Center staff during my participation.

Participant's Name (please print): _____	Date: _____
Participant's Signature: _____	
Parent/Guardian Name (please print): _____	Date: _____
Parent/Guardian Signature: _____	
(Signature of Parent or Legal Guardian required for participation)	

Summer Camp Packing List

Things To Bring:

- Alarm Clock (optional)
- Bath towel / wash cloth
- Beach towel (optional)
- Bible and pen (crucial)
- Pillow (*Please mark your name on it!*)
- Sleeping bag (*Please mark your name on it!*)
- Sunscreen/Bug repellent
- Spending money*
- Shorts, shirts, socks, etc.* (Also bring clothes that can get a little messy during some of the competition and some warmer clothes in case of cool nights.)
- Sleepwear / underclothes (Make sure you have enough.)
- Swimsuit *(*appropriately modest*)
- Tennis shoes, sandals, or water socks/sandals, activity appropriate (Non-marking for the gym floor)
- Toiletries (toothbrush, toothpaste, hairdryer, shampoo, deodorant, etc.)
- Water Bottle (optional)

** refer to guidelines in the Parent Letter*

Dress Up Theme Nights:

Please encourage your child(ren) to bring items to participate in these theme nights.

Sunday: Favorite Sports Team

Monday: Superhero

Tuesday: Pirate Night

Wednesday: Rad in Plaid

Thursday: Cartoon Character

Talent Show: Wednesday evening is the Camp Talent Show. Our preference is for all songs and performances to be God-glorifying. Talent show material must be approved by Josh or Aaron in advance. Please see them by Monday evening. If you have any questions about the material you plan to use, just ask!

DO NOT BRING: Any electronic devices of any kind such as iPods, CD players, radio headphones, hand-held electronic games, etc. If we see students playing on these devices, they will be taken away. You may bring cell phones for calling home and taking pictures at designated times, but any other use will be prohibited (such as calling or texting your friends, playing games, etc.).