

# Covenant Cedars 2009 Summer Camp Information

## Registration Form and Fees

Complete and return registration form and \$75 non-refundable deposit as soon as possible. (Pathfinder deposit is \$25.) Please remit all payments through your church's camp coordinator. Your pastor or youth pastor can help. If your church does not have a camp coordinator, remit all payments directly to Covenant Cedars. Return the remaining balance two weeks before your camp start date. A confirmation packet will be mailed to you two weeks after registration is received. Registrar reserves the right to close registration if camp is already at capacity. The registration dates and fees are below.

	Before April 1*	April 1 - June 1*	After June 1*	Deposit**
<b>Trailblazer</b>	\$250	\$260	\$275	\$75
<b>Explorer</b>	\$300	\$310	\$325	\$75
<b>Jr. High</b>	\$300	\$310	\$325	\$75
<b>Sr. High</b>	\$300	\$310	\$325	\$75
<b>Niobrara</b>	\$215	\$220	\$225	\$75
<b>Last Chance</b>	\$125	\$135	\$140	\$75
<b>Pathfinder</b>	\$65 for the day and \$85 to spend the night			\$25
*postmarked by date    **deposit is non-refundable				

## Camper Registration and Pickup

If you are bringing your child to camp, please go through registration with them before dropping them off at their cabin. If your child comes with a group, the group leader is responsible for registering all the campers before going to their cabins. Have all medication and canteen money ready at check-in. Campers are expected to be at camp for the entire stay. Arrangements must be made with the camp office for late arrivals and early departures. There are no discounts or refunds in any case. Please note the camper registration and pickup times below:

	Camp Dates	Drop-off Date	Time	Pickup Date	Time
<b>Sr. High</b>	June 21-26	Sunday, June 21	4pm	Friday, June 26	12:30pm
<b>Pathfinder</b>	June 27-28	Saturday, June 27	10am	Sunday, June 28	12:30pm
<b>Trailblazer</b>	June 28-July 1	Sunday, June 28	4pm	Wednesday, July 1	12:30pm
<b>Explorer</b>	July 5-10	Sunday, July 5	4pm	Friday, July 10	12:30pm
<b>Jr. High</b>	July 12-17	Sunday, July 12	4pm	Friday, July 17	12:30pm
<b>Niobrara</b>	July 26-29	Sunday, July 26	1pm	Wednesday, July 29	12:30pm
<b>Last Chance</b>	August 11-13	Tuesday, August 11	10am	Thursday, August 13	1pm

## Canteen and Offering

During their stay, your camper has the opportunity to visit the camp store (shirts, hats, etc.) and the canteen (pop, candy, etc.). Cedars controls loss of money by using canteen cards, sold in \$5.00 increments. All money will be turned in for safe keeping. These are used for all purchases. Any money remaining on the card is returned to the camper at the end of the week and can be used for offering. Every week there is an offering taken to advance the mission of the Covenant in the world.

## Health Certificate

Every youth camper must have an accurately completed and signed health certificate and liability release form from camp. If the camper has a history of medical problems, a doctor's examination may be necessary.

## Roommates

Each camper will find out his/her cabin assignment upon arrival at camp. In order to be placed with a friend of your choice, both camper and friend must request each other as preferred roommates. Please sign up for no more than two roommates. There is no guarantee that clusters of friends will be placed together in cabins.

## Phone Calls

Outgoing calls are strongly discouraged, but will be allowed with written permission from a parent or guardian, or when deemed beneficial by the administration. Emergency calls will be made by camp personnel.

## Daily Visitors

Anyone is welcome to visit with prior approval and must register at the camp office.

## Contact Us

If you have questions or comments, feel free to contact us at (402) 757-3241.

# SUMMER CAMP 2009 REGISTRATION

PLEASE COMPLETE BOTH SIDES

LAST NAME	FIRST NAME	CAMP
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Complete this registration entirely, detach, and return it with your deposit to your camp coordinator. Return it to Cedars if you do not have a camp coordinator.

- SELECT CAMP
- |   |   |
|---|---|
| <input type="checkbox"/> Pathfinder (Day Only)  | <input type="checkbox"/> Jr. High         |
| <input type="checkbox"/> Pathfinder (Overnight) | <input type="checkbox"/> Sr. High         |
| <input type="checkbox"/> Trailblazer            | <input type="checkbox"/> Niobrara Journey |
| <input type="checkbox"/> Explorer               | <input type="checkbox"/> Last Chance Camp |

NAME \_\_\_\_\_ GENDER  M  F

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BIRTHDATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_ GRADE ENTERING IN FALL \_\_\_\_\_

EMAIL \_\_\_\_\_

Check here to be added to the Covenant Cedars e-mail list

T-SHIRT SIZE (select one, a large will be ordered if no size is indicated)

Child  6/8  10/12  14/16 Adult  S  M  L  XL  2XL

PARENT'S / GUARDIAN'S NAME \_\_\_\_\_

PARENT'S / GUARDIAN'S EMAIL \_\_\_\_\_

Check here to be added to the Covenant Cedars e-mail list

PHONE Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

CHURCH \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

PREFERRED ROOMMATE \_\_\_\_\_

## HEALTH FORM

**PLEASE NOTE:** Any and all prescriptions are to be in their original prescription container(s) with camper's name, doctor's name, medication name, dosage and how it is to be administered. We can not and will not accept medication in any other containers.

Food & Medical Allergies \_\_\_\_\_

Last MMR Shot \_\_\_\_\_ Last Tetanus Shot \_\_\_\_\_

Medications Used \_\_\_\_\_

Have you been recently exposed to any disease? (Measles, Mumps, Chicken Pox, etc.)

Explain \_\_\_\_\_

Doctor \_\_\_\_\_ Clinic \_\_\_\_\_

City \_\_\_\_\_ STATE \_\_\_\_\_ Phone \_\_\_\_\_

Program limitations, precautions, or special needs \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Medical Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

**ATTACH COPY OF MEDICAL CARD TO REGISTRATION**

**PARENT/GUARDIAN MEDICAL CONSENT:** "I hereby give permission to Covenant Cedars Bible Camp to secure emergency medical and surgical treatment and routine non-surgical medical care for my child while in camp (including aspirin, acetaminophen, ibuprofen and prescription drugs)."

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

**→ PLEASE CONTINUE REGISTRATION ON OPPOSITE SIDE →**

**PLEASE COMPLETE OPPOSITE SIDE OF REGISTRATION FIRST**

LAST NAME	FIRST NAME	CAMP
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**RELEASE & IDEMNITY AGREEMENT**

In signing this document, I hereby certify that I give permission for my son or daughter to participate in the camping program of Covenant Cedars Bible Camp. I also authorize Covenant Cedars Bible Camp to use photographs & video, including those of my son or daughter, in camp promotion and publicity; including printed documents, our web site, and videos. Your child will never be identified by name.

In consideration of permission granted the herein named individuals to participate in camping activities, we hereby release and agree with Covenant Cedars Bible Camp that we will never individually or as legal guardians of said individuals, institute any action at law or in equity for any personal injuries, or injuries to property, real or personal, caused by Covenant Cedars Bible Camp, its successors and legal representatives; we further agree to indemnify and hold Covenant Cedars Bible Camp harmless against any and all costs, damages and expenses which may be incurred by them as a result of any law suit we might file against them.

Parent/Guardian Name	Signature	Date
Parent/Guardian Name	Signature	Date

**1-2-3 COME TO CAMP FREE**

Bring a friend who has never come to Covenant Cedars before and receive \$50 off your registration. Bring two friends and receive another \$50 off. Bring three friends and you can come to camp free. This offer does not apply to Pathfinders or first year Trailblazers who would have already been coming to camp, the purpose of this program is to engage those who would not have come normally. Siblings are excluded from this program.

Check here if you have never been to Covenant Cedars before and write the name of the camper who invited you:  
\_\_\_\_\_

Check here if you invited someone to Covenant Cedars and write the camper(s) name(s) you invited:  
\_\_\_\_\_

**ADDITIONAL INFORMATION**

Once you have completed both sides of the registration, detach, and give it with your deposit to your church's camp coordinator. If you do not have a church camp coordinator, send form registration and deposit to:

**Covenant Cedars Bible Camp  
P.O. Box 68  
Hordville, NE 68846**

The deposit for all camps is \$75, except for Pathfinder, which is \$25. The deposit is non-refundable. Your remaining balance is due two weeks prior to camp. If you have questions, call us at (402) 757-3241.

**Total amount sent: \$** \_\_\_\_\_

Additional  \$10  \$20  \$\_\_\_\_\_ enclosed for camper scholarship fund.

**If you have questions, call us at (402) 757-3241.**

Rules for acceptance and participation in Covenant Cedars are the same for everyone regardless of age, sex, color, race, handicap, or national origin. Any person who believes he or she has been discriminated against in these USDA related camps, should write to Administrator of Food and Nutrition Service, 3101 Park Center Drive, Alexandria, Virginia 22302.

For Office Use Only

Name _____	Date _____	Check # _____	Amount _____	Due _____
Name _____	Date _____	Check # _____	Amount _____	Due _____
Name _____	Date _____	Check # _____	Amount _____	Due _____