

CAMP ACTIVITIES



CAMP INFORMATION

AGES: Junior Weeks are for campers entering 2nd-6th grade. Teen Weeks are for campers entering 7th-12th grade or completing 12th grade.

CAMP COST: \$85.00 per camper/counselor. Includes: 3 meals and 2 snacks a day. Extra money needed for t-shirts, CD's and concession stand. Early registration discount: for every 10 registrations paid by June 1st, one counselor comes free. Each group must call with total number attending by May 15th. Each counselor is required to have a background check done through SLBC for a fee of \$20. Email addresses for each counselor and payment will be needed before camp begins.

ARRIVAL: Check-in times will be from 3pm-5pm each Monday. Supper will be served at 5pm. Please try to arrive by 4:30pm.

DEPARTURE: Camp ends at 9am after breakfast on Friday.

DRESS STANDARDS: As a Christian camp, we desire to honor the Lord in all things. Because God's Word instructs us to do all things decently and in order, we have established the following guidelines to honor the Bible principles of modesty and identity (1 Corinthians 11:6,14; 14:40 and 1 Timothy 2:9). We do not desire to judge any one's heart, but to simply honor the Lord. We realize that nothing outward can produce inner consecration of heart. Thank you for your spirit of understanding and cooperation.

Young ladies are to bring knee-length skirts or dresses for the evening services (slits must not come above the knee). Loose-fitting culottes may be worn for all activities. Any fashion worn must come at least to the bottom of the knee, be loose-fitting, and cover the shoulders. Low necklines (front or back) are not acceptable camp attire. Swimsuits should be one-piece and worn under a dark t-shirt and dark culottes. No pants or shorts please.

Young men are to wear collared shirts and pants for services and casual pants or jeans for activities. Long swim trunks and a dark t-shirt are needed for water activities. No shorts please.

No one is to wear tank tops, spaghetti straps, net or sleeveless t-shirts or clothing advertising unChristian themes. Mark your clothing for I.D. purposes (we are not responsible for anything lost or stolen) and please bring enough to wear (we will not be washing for you).

WHAT TO BRING: Bible, paper, pen, blanket, sheets, pillow, towels (bath & lake), washcloths, toiletries, swimming attire (separate swim times are scheduled for male and female campers), swim shoes, athletic shoes for activities, sunscreen, a robe for girls, and a good attitude.

WHAT NOT TO BRING: All electronic and media devices, magazines, tobacco, alcohol or any drug, knives/weapons, questionable things, or a bad attitude - "If in doubt, don't." (A cell phone use policy will be in effect)



HERITAGE CHRISTIAN CAMP

at Dry Fork

THE RACE
IS ON

A ministry of
Shining Light Baptist Church
Monroe, NC
Tim Cruse, Pastor

Each participant must have a completed and signed release form to turn in at registration by the first day of camp in order to participate.

Please be thorough and complete with your information. (Churches may photocopy and distribute this form). Registration forms will be retained in the SLBC office.

CAMP DATES:

- Junior Week I - June 8-12 Junior Week II - June 22-26
 Teen Week I - June 15-19 Teen Week II - July 13-17
 Basketball - July 6-10 Volleyball - July 20-24

CAMPER INFORMATION:

Minor's Full Name:
Address:
City, State & Zip:
Phone Number: ()
Email Address:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth: / /
Parent/Legal Guardian:

CHURCH INFORMATION:

Church Name:
Address:
City, State & Zip:
Phone Number: ()
Pastor's Name:
Youth Director's Name:

Mail this completed form to:

Heritage Christian Camp
 c/o Shining Light Baptist Church
 2541 Old Charlotte Highway
 Monroe, NC 28110

Phone: 704-283-1480

Fax: 704-289-4945

Email: slbc@slbc.net

Website: www.HeritageChristianCamp.com

INSURANCE INFORMATION: (Required for participation)

Parent's Name:
Insurance Company:
Address:
City, State & Zip:
Phone Number: ()
Medical Insurance Policy/Group Number:

EMERGENCY INFORMATION:

Name to Contact:
Address:
City, State & Zip:
Cell Phone Number: ()
Daytime Phone Number: ()
Evening Phone Number: ()

MEDICAL INFORMATION: (A nurse will be on duty throughout the day and certified lifeguards during all swim times)

I represent that any medication to which Minor is allergic or medications that Minor is currently taking are listed below. I agree that Minor shall bring medications which Minor is currently taking with him/her to the Camp and that he/she shall consume the prescribed dosage for such medications.

Medications (if any):
Allergic to (if any):
I acknowledge that the Minor suffers from the following conditions:
Activities to be avoided:
Family Doctor:
Phone Number: ()

LIABILITY RELEASE:

I _____, as parent or legal guardian of _____, a minor (hereinafter "Minor"), hereby grant the permission necessary to allow Minor to participate in camp to be conducted by Heritage Christian Camp/Shining Light Baptist Church (hereinafter "Releasees"). I further agree to release and to hold harmless Heritage Christian Camp/Shining Light Baptist Church from any and all liability or any other claim judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with the Camp, including any claim arising out of or connected with any illness or injury (minimal, serious, catastrophic and/or death) that the Minor may incur or sustain during the Camp, all activities associated with the Camp (including water-related activities and zip-lines) and while traveling to, within and from the site for the Camp.

MEDICAL RELEASE:

I acknowledge and agree that such participation subjects Minor to possibility of physical illness or injury and that I acknowledge that the Minor is assuming the risk of such illness or injury by participating in the camp. In the event of such illness or injury, I authorize Heritage Christian Camp/Shining Light Baptist Church to obtain necessary medical treatment of the minor and hereby release and hold harmless Releasees in the exercises of this authority. I further acknowledge and understand that I will be responsible for any and all medical and related bills that may be incurred on behalf of the Minor for any illness or injury that the Minor may sustain during the Camp and while traveling to, within and from the site for the Camp.

APPEARANCE AGREEMENT:

I understand that Heritage Christian Camp/Shining Light Baptist Church from time to time produces promotional material relating to its programs. I understand that as a participant and/or a spectator at the Camp that Minor may be included in videotapes or photographs taken during the Camp. Therefore, I, grant permission to Heritage Christian Camp/Shining Light Baptist Church to use such videotapes and photographs in advertising and promoting the Camp or similar future events.

I, in my own behalf and on behalf of the Minor, hereby warrant that I have read this Participant Release and Waiver Form in its entirety and fully understand its contents. I also release Releasees from liability and acknowledge my voluntary and knowing assumption of the risk of injury or illness. I have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian:

X _____ Date: _____
 Relationship to Minor: _____

I, identified above as Minor, acknowledge that I have read this Release and Waiver form.

Signature of Minor:

X _____ Date: _____