

2010 Camper Application Form for *United Youth Camps*

Sponsored by:
United Church of God, *an International Association*

North Central Region Pre-Teen Youth Camp

Ironwood Springs – Rochester, MN

July 25 – 28, 2010

www.ucgpreteencamps.org

APPLICATION DEADLINE: JUNE 30, 2010

Include a recent photo
taken within the past
3 months.

Note: Application cannot
be processed without
a recent photo

Date of Photo: _____

CAMP FEES

1ST Camper: \$125 2nd Camper: \$110 3rd Camper: \$95 Family Maximum: \$350

Make checks payable to: UCG PRETEEN CAMP

Mail to: UCG PreTeen Camp – Cory & Colene Erickson – 818 Spring Hill Court – Woodbury, MN 55125

Financial Aid: Please contact Colene & Cory Erickson at ericksoncc@comast.net.

Health Exam Required: You must also complete the Health History and Examination Form for your application to be complete. Health Exams are good for 24 months.

For office use only

Date Rec'd: _____

Paid? _____

Health History/Exam Form Rec'd? _____

Ministerial Evaluation Rec'd? _____

Acceptance Letter Sent? _____

PERSONAL INFORMATION

Applicant's name (print): Last _____ First _____ Middle _____

Last grade completed by June: _____ Sex: Male Female

Address: _____

City: _____ State: _____ Zip: _____

Birth Date: / / Telephone Number: () Age by end of camp this year: _____

Email *(All communication will be sent via Email – please write legibly!)*

E-mail: _____

T-Shirts *(T-shirts will be provided for all campers. T-shirts will be worn and washed during camp – please be careful selecting the size!)*

Youth T-shirt Size (Circle One) S M L or Adult T-shirt Size (Circle One) S M L XL

Congregation *(A ministerial evaluation will be secured prior to acceptance)*

Do you attend church regularly? Yes No Congregation: _____ Pastor's Name: _____

Have you attended United camps before? Yes No If yes, when and where? _____

Swimming proficiency: Can't swim Beginner Intermediate Skilled

HEALTH AND REASON FOR APPLYING

Do you have any health problems, disabilities, severe allergies or any other condition that may require treatment at camp or that could limit your camp experience and full participation? Yes No If yes, please explain (attach note if needed for full explanation): _____

List any on-going medical care or medication you are taking (if none, state "NONE"): _____

Are you willing to be a **FULL PARTICIPANT** in camp (except for health limitations noted above)? Yes No

In your own words, explain why you want to attend this camp: _____

Applicant's signature: _____

AGREEMENT AND RELEASES

Compliance with Rules: All United Camps maintain a high standard of conduct and dress, based on God's laws, which is further stated in the Code of Honor. These standards and rules include, but are not limited to: No possession or use of alcohol, tobacco or illegal drugs; no sexual misconduct, theft, smoking, disorderly conduct, profanity, destruction of property or refusal to cooperate fully with the camp staff. Jewelry for body piercings (other than earrings for girls), short shorts, midriffs, halter-tops or wearing revealing or other inappropriate apparel (or the lack thereof) will not be allowed. Hair should not be an unnatural color, and hair length should be appropriate (short for boys, longer for girls). Pets, personal sports equipment and camper use of private vehicles are not allowed at camp, except as noted in the acceptance package. Firearms or other weapons (except pocketknives) may not be brought without the written permission of the camp director. Under certain circumstances I am aware that a search of my belongings or living quarters may be made in my presence by camp staff. Campers who do not comply with the camp's rules and standards, or whose conduct or attitude undermines the positive environment and objectives of the camp, or who have made any false, misleading or incomplete statement in this application or the Health History and Examination Form, are subject to being dismissed. If the camper is dismissed, he or she will be sent home at his or her parent's expense.

Photo Release: By my/our signature(s) below, I/we also hereby give consent and permission to the nonexclusive, noncommercial reproduction, publication or use by United Church of God, *an International Association* ("Church") or anyone authorized by them, of any pictures or photographs (still, video or motion, individual or group), taken of the applicant at any United Youth Camp or its related activities (including travel) or, if taken during any other Church-related activities, together with any caption or descriptive material, including the individual/camper's name, without compensation to the undersigned. Said picture(s) may be used without limitation, on Church Web site(s), in Church publications, in "Festival" or other videos or promotions created by the Church, in Church-sponsored advertising or in any television program or broadcast approved by the Church.

General Release: In consideration of the applicant being allowed to attend the camp, I/we hereby release, indemnify, save and hold harmless and covenant not to sue the United Church of God, *an International Association*, its officers, Council of Elders, agents, employees, volunteers and helpers and any other related entity (hereinafter collectively called the "Church") from all actions, claims, demands or suits which are based upon, or result from injuries sustained by the applicant arising out of, or in the course of, said applicant's participation or attendance at the camp. This release, however, shall not apply to claims covered by the Church's liability insurance, but is applicable to claims not covered by that insurance. *It is strongly recommended that you have your own medical insurance protection* since participants are involved in activities at their own risk.

Parent(s) of Minors: Activities of the camp are described in the United Youth Camps annual brochure. I/we have read the brochure, are aware of the activities offered and hereby give permission for (applicant's name) _____ to attend the United Camp marked on Page 1, to be transported in camp-designated vehicles for any off-site activities and to participate in all the activities (unless otherwise noted on the Health History and Examination Form and in the space on the preceding page). Permission is hereby given to search camper belongings or living quarters with him/her present when health, well-being or safety of the camper or others requires it, or where there has been an accusation or some evidence of his/her possession or use of forbidden materials or substances. I/we understand that if he/she violates camp rules or standards or endangers the safety or well-being of the camp, other campers or its staff or otherwise fails to comply with the foregoing requirements to which he/she has agreed, that he/she can be sent home at the camp director's request, which, I/we agree, will be at my/our expense. I/we understand there is no reimbursement of fees after 30 days before camp starts. Before that time, a processing fee of \$25 will be withheld from the refund unless the space is filled. I/we believe my/our son/daughter is in good health and can participate in strenuous activities and the usual routine associated with camp life. I/we verify and concur that the information supplied in this application and on the Health History and Examination Form is true and complete.

Primary phone number(s) where you can usually be reached: _____

Also give auxiliary phone(s) (pagers, etc.) of friends/relatives where you can be reached: _____

Please briefly explain what you hope your son or daughter will learn from his/her experience at camp:

Are you aware of any special needs of your son/daughter such as facilities, medical attention, supervision or counseling? Yes No
If yes, please describe.

Signature(s): I have read, fully understand and agree to the foregoing, including the photo and general release statements above.

X _____ Date _____
Camper's Signature

X _____ Date _____ X _____ Date _____
Father's Signature Mother's Signature

Mail this application and completed Health Exam by June 30, 2009