

JUNE 16-21

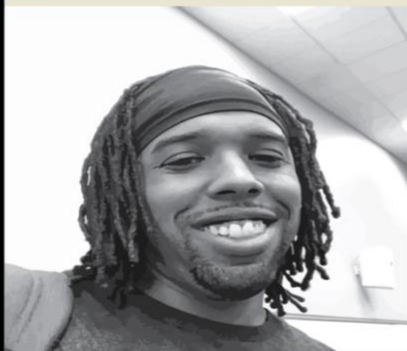
Minnetonka

IDENTITY

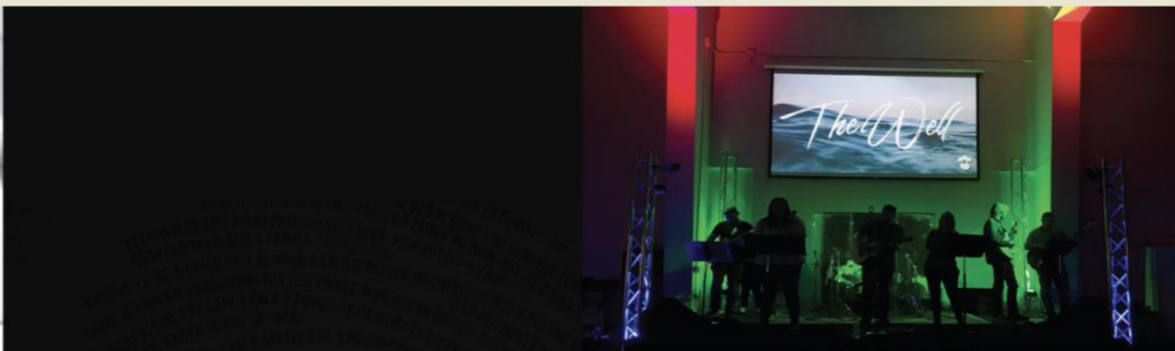
SUMMER CAMP 2019

SPEAKER

WORSHIP



TOMMIE TURNER



THE WELL

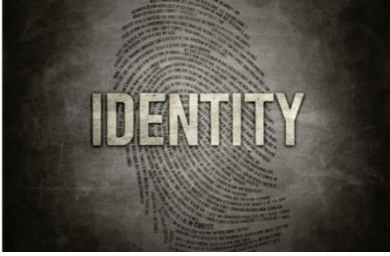
IDENTITY

COST: \$230

REGISTER @

<http://pbcarlington.org/ministries/students/>

Summer Camp 2019: Informational Packet



Camp Speaker: Tommie Turner

Camp Band: Austin Worship

Cost: \$230

What is Youth Camp?

It is a weeklong summer camp experience for middle and high school students. We really believe that getting the teens away from their usual surroundings to hear from God and experience His incredible love and power is a life changing experience! It'll be a week of great fun, new friends, and incredible encounters with God!

The theme for camp this year is *Identity: Who Am I*. Our focus this year will be to teach our students that their identity is secure in who Jesus is! The truth is that none of us can really know who we are until we know whose we are. Will you join me in praying that our students and leaders will have a better understanding of who they are in Christ.

Where?

Minnetonka Christian Camp (918) 569-7856

Clayton, OK

<http://minnetonkacamp.com>

When?

June 16th – 21nd

Who?

Youth Camp is for students going into 7th through those who have completed the 12th Grade. We encourage teens to invite their friends, because everyone is welcome!

When is deadline to sign up?

We do not turn any students away. Students can sign up the day we leave; however, we prefer for them to sign up before because it helps us prepare.

When do we leave?

We leave on June 16th at 1:00 PM. We ask that all students bring their packed bag to Sunday School at 9:00AM. Students will bring the bag to the gym and checking. Parents need to check in their student(s), so all paper work can be checked, and payment can be made. If students cannot make during the Sunday School hour, then Student need to arrive before 12:00 PM.

- Once students have checked in, they are required to stay on the campus. We will provide lunch for all students (pizza).
- Due to limited space, students can bring one main bag and a carryon bag.

When do we return?

We will return Friday, June 21nd. We will leave the camp around 10:00 AM and we should arrive at the church before 3:00 PM. We will stop for lunch around noon, so students will need to save some money for lunch (about \$10). We will keep parents updated on our arrival by text.

How to get ready for camp?

- Review the “What to bring” list.
- Fill out Camper Release Form
- Copy Shot Records
- Copy front and back of health insurance card

Leaders Going to Camp

Stephen Harwell	(817) 733-9200
Sarah Harwell	(817) 733-9201
Brian White	(817) 718-3664
Kim White	(817) 718-3665
Gayle Gann	(972) 977-5881
Carla Law	(817) 614-3190
Ashley Alcala	(817) 709-4303
Andrew Valdez	(520) 203-1741

CRASH

C **R** **A** **S** **H**
Causing Revival and Sharing Hope

2019 Summer Camp Registration Form

Pleasant View
Baptist
Student
Ministry

NAME: _____

PLEASE CIRCLE THE APPROPRIATE ANSWERS BELOW:

GRADE: 7 8 9 10 11 12

AGE: 12 13 14 15 16 17 18 19

T-SHIRT SIZE: S M L XL XXL

TO ENSURE YOU'RE MEDICATIONS ARE TAKEN...

WILL YOU BE BRINGING MEDICATIONS? YES OR NO

IF YES, PLEASE LIST THE MEDICATIONS, DOSAGE, AND TIMES BELOW:

STUDENT MINISTRY USE ONLY:

<input type="checkbox"/> PAID IN FULL	<input type="checkbox"/> CASH	CHECK # _____	<input type="checkbox"/> ONLINE
<input type="checkbox"/> PAID PARTIAL	AMOUNT PD. _____	AMOUNT OWNED _____	
<input type="checkbox"/> SCHOLARSHIP	<input type="checkbox"/> LEADER	DATE PD. _____	

Camper / counselor registration, health, and waiver form

THIS FORM IS REQUIRED FOR EVERY PERSON IN YOUR GROUP

*****Please NO PETS ALLOWED*****

Camper name _____

Camper phone # _____ Male ____ Female ____

Camper age _____ Camper Birthday _____

Parent/ Guardian Name _____

Parent/Guardian Phone _____

Address _____

Attending church _____

Camper Shot Records (These are required for any medical treatment that may be required) Vaccines,

Last Date Administered

☐ Measles _____

☐ Mumps _____

☐ Rubella _____

☐ Meningococcal _____

☐ Hepatitis A _____

☐ Hepatitis B _____

☐ Tetanus _____

☐ Diphtheria _____

Allergies or restrictions - Please list

Any Medical or special treatment - Please list

Authorization for medical treatment

By signature I verify that this information is accurate and true. By signature I give permission for diagnoses, therapeutic, and operative procedures as deemed necessary.

➤Guest signature _____

➤Parent/Guardian signature (if guest is under 18) _____

➤Please print first and last name as signed above _____ Date _____

Consent for camper participation in activities, and for the use of images or recordings of camper without compensation

➤Guest signature _____

➤Parent/Guardian signature (if guest is under 18) _____

➤Please print first and last name as signed above _____ Date _____

Please note:

Camper's who have not had their 13th birthday, and anyone who cannot pass a basic swim test are required to wear a U.S. Coast Guard approved flotation device while participating in swimming or boating activities.

Also, additional activities that may be offered at camp include basketball, canoe, challenge course, hiking, volleyball, horseshoes, kayak, paddle boat, paint ball, softball, swimming, speed stack, waterslide, zip line, etc.

As parent / Guardian I give permission for my child to participate in all activities at Minnetonka Christian Camp, and waive any liability on the part of Minnetonka Christian Camp.

➤Guest signature _____

➤Parent/Guardian signature (if guest is under 18) _____

➤Please print first and last name as signed above _____ Date _____

Pleasantview Baptist Church

Permission and Medical Release Form

I, _____ (parent/guardian), give my permission
for _____ (child) to participate in the ministry of Pleasantview Baptist Church,
Arlington, Texas during the dates of _____ and _____. I also give my permission to
transport my child to/from any church related activity.

I do **not** authorize my Child to engage in the following activities: _____

IMPORTANT INFORMATION (Please complete)

Participant Information:

Name _____ Birthdate _____

Home Address _____

Home Phone _____ Cell Phone _____

Email Address _____

Please list any medical conditions, injuries, or allergies: _____

Emergency Contact Information:

Name _____ Phone _____

Name _____ Phone _____

Physician Information:

Physician _____ Phone _____

Insurance Information (Please Copy front and back of insurance card):

Company _____ Effective Date _____

Group I.D. # _____

Medical Release: In the event of an emergency, in which you are unable to reach me (parent/guardian), in case of injuries, accidents, or illness, I give my permission for treatment deemed necessary in consultation between attending emergency physician and the Event Leader for Pleasantview Baptist Church. I also release Pleasantview Baptist Church and its staff of liability in the case of accidents or injuries to my child while attending any event or trip.

(Signature of parent/guardian)

(Date)

Pleasantview Baptist Church

Waiver of Liability and Disclaimer

I, _____, am the parent or legal guardian of _____. I have given my consent to Pleasantview Baptist Church, 4400 Pleasantview Dr., Arlington, TX for my Child to participate in the following event(s): _____.

I am at least eighteen (18) years of age and legally competent to sign this Waiver of Liability and Disclaimer on behalf of my Child. I hereby certify that, to the best of my knowledge, my Child is in good health and able to participate in the Event. I understand that the Event and activities associated with the Event involve certain risks, and that injuries can occur that may require certain first aid and/or medical treatment. In consideration of my Child being allowed to participate in the Event, I hereby acknowledge that I and my Child assume all risk in connection with the Event for any harm, injury, or damage that may befall my Child as a result of my Child's participation in the Event, including activities preliminary and subsequent to the Event, whether foreseen or unforeseen. I understand and agree and hereby acknowledge that, except as otherwise state herein, I will not attempt to hold Pleasantview Baptist Church liable in any way for any occurrences with this Event that may result in injury, death, or other damages to my Child.

I, ON BEHALF OF ME AND MY CHILD, DO HEREBY EXEMPT AND RELEASE PLEASANTVIEW BAPTIST CHURCH, ITS OFFICERS, DEACONS, MINISTERS, DIRECTORS, EMPLOYEES, VOLUNTEERS, CONTRACTORS, STAFF, AFFILIATES, AGENTS, AND ATTORNEYS (COLLECTIVELY, THE "RELEASED PERSONS") FROM ANY AND ALL LIABILITY WHATSOEVER FOR PERSONAL INJURY, PROPERTY DAMAGE, OR WRONGFUL DEATH CAUSED BY THE ACTS OR OMISSIONS OF ANY ONE OR MORE OF THE RELEASED PERSONS ARISING OUT OF THE EVENT OR MY CHILD'S PARTICIPATION IN THE EVENT, SAVE AND EXCEPT FOR THE FOLLOWING:

1. (1) ANY SUCH LIABILITY CAUSED BY THE NEGLIGENCE OF ANY ONE OR MORE OF THE RELEASED PERSONS TO THE EXTENT COVERED BY INSURANCE; AND/OR,
2. (2) ANY SUCH LIABILITY CAUSED BY THE GROSS NEGLIGENCE AND/OR WILLFUL OR INTENTIONAL MISCONDUCT OF ANY ONE OR MORE OF THE RELEASED PARTIES.

I FURTHER HEREBY ACKNOWLEDGE AND AGREE TO DEFEND, INDEMNIFY, SAVE, HOLD HARMLESS, AND COVENANT NOT TO SUE THE RELEASED PERSONS FOR ANY AND ALL CLAIMS, DEMANDS, DAMAGES, CAUSES OF ACTION AND SUITS IN EQUITY, WHETHER ARISING OUT OF COMMON LAW, EQUITY, ARBITRATION OR STATUTE, NOW OR HEREAFTER ARISING, KNOWN OR UNKNOWN, ASSERTED BY ME, MY CHILD, OR MY SPOUSE (AND MY OR THEIR RESPECTIVE ESTATES, HEIRS, EXECUTORS, ADMINISTRATORS, OR ASSIGNS) ARISING SOLELY OUT OF: (1) MY CHILD'S ACTS OR OMISSIONS THAT OCCURRED DURING THE EVENT; AND/OR (2) MEDICAL TREATMENT OR SERVICES PROVIDED TO MY CHILD WHILE PARTICIPATING IN THE EVENT, BUT ONLY TO THE EXTENT SUCH TREATMENT WAS AUTHORIZED BY ME, IN WRITING, IN CONNECTION WITH THE EVENT.

Please check box if agreed:

- ☐ I hereby acknowledge and expressly agree that all indemnities, releases and waivers contained in this Waiver are intended to be as broad and inclusive as permitted by the laws of the State of Texas and that, if any portion of the agreements in this Waiver are held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
- ☐ This Waiver and the separate Medical Consent, if any, executed in connection with it contain the entire agreement between me and Pleasantview Baptist Church regarding my Child's participation in the Event.
- ☐ I understand the terms herein are contractual and not merely recitals, and that I have signed this document of my own free will.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS WAIVER BY READING IT BEFORE SIGNING.

(Signature of parent/guardian)

(Date)

What to Bring...

Clothes to wear for 5 days (daily play and Chapel)

- Girls:
 - No spaghetti straps shirts, no short shorts, and no short or tight-fitting skirts.
 - All shorts and dresses need to come to at least 3 to 5 inches above the knee.
 - Swimsuits (girls one-piece or if two-piece then they must wear t-shirt over Swimsuit).
- Guys:
 - cut off sleeves that reveals chest, must wear a shirt always, except when swimming
 - Note: T-shirt must be worn to and from swimming.

Make sure all clothing is appropriate

Shoes

Towels (approx. 3)

Toiletries: toothbrush, toothpaste, comb, hair gel, hair soap,
body wash, and etc.

Camera

Bedding: pillow, blankets, sleeping bag, and etc.

Flashlights

Snacks

Bible

Paper

Pens and pencils

Insect repellent

Sun Screen

Money for the snack shack

DO NOT BRING:

Weapons of any kind (knives or guns)

IPods, MP3 players, DVD players, and etc.

Gaming systems

Tobacco products or illegal drugs

Do not bring anything to prank; there will be a strict no prank policy.

Cell Phones will be allowed on bus **only!** When we arrive at camp, **all phones will be taken up.** Students will get phones back when we leave to come home. The whole purpose of camp is to get away from all outside worldly influences and grow our relationship with Jesus Christ.