

# Camper Registration Form

## Winter Camp at Camp Carmel

\*Please fill out the registration form completely. Leave nothing blank. Upon proper completion, mail or email form to Erica Leeds, Camp Carmel Director. Her information can be found at the end of this form.

This camper will attend **Winter Camp** at  
**Camp Carmel** from **December 27th** to **December 30th, 2022.**

Please NOTE: Drop-off for Winter Camp begins at 5pm on the evening of the 27th.  
All Campers must be picked up beginning at 10am, and by 11am on the morning of the 30th.

Camper First Name: \_\_\_\_\_

Camper Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age during camp: \_\_\_\_\_

Current Grade: \_\_\_\_\_ ☐ Male ☐ Female

Home Phone: \_\_\_\_\_

Parent Cell Phone: \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Home Church: \_\_\_\_\_

**Reminder: Do NOT leave any fields blank!**

**If necessary, write SAME AS ABOVE or N/A.**

-----**Father/Guardian**-----

-----**Mother/Guardian**-----

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Street: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

-----**Emergency Contact**-----

-----**Pick Up Authorization**-----

Contact Name: \_\_\_\_\_

Person(s) authorized to transport camper  
to/from camp: \_\_\_\_\_

Relationship to Camper: \_\_\_\_\_

Person(s) NOT authorized to transport camper  
to/from camp: \_\_\_\_\_

Phone: \_\_\_\_\_

**FOR CAMPERS:** I understand that this camp seeks to provide a safe, spiritually enthusiastic environment that allows participants to grow in Christ and to develop Christian community. All leaders, campers, and volunteers are expected to:

- Respect one another,
- Respect the camp property, including the natural setting,
- Use no profanity, tobacco products, alcohol, or illegal drugs,
- Wear modest and appropriate clothing,
- Participate and cooperate in all activities, and
- Behave in a way that is not disruptive to the program.

The camper's signature below indicates his/her willingness to abide by the above guidelines:

**Camper's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR PARENTS:** I understand that all campers are expected to participate in the camping program and take direction from the Camp Manager, Camp Directors, and Camp Leaders. Campers who are consistently unable to follow camp rules and/or take directions, could, at the discretion of the Camp Manager or Camp Director, be dismissed. Parents, under these circumstances, would then be contacted to make arrangements to have their camper picked up as soon as possible and prior to the scheduled end of camp.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR PROPER REGISTRATION OF YOUR CAMPER:**

Please complete and send in all of the following:

- Camper Registration Form
- Medical Record and Authorization Form
- Photo Release and Liability Release Form
- Coronavirus Waiver form
- Enclosed Payment or Scholarship Application (Or other information regarding your payment)

**Forms must be mailed or e-mailed to the Camp Director:**

**Camp Carmel:**

Erica Leeds  
[campcarmel1952@gmail.com](mailto:campcarmel1952@gmail.com)  
P.O. Box 884  
Linville, NC 28646  
(828) 817-3708

## Medical Record and Authorization Form

### Winter Camp at Camp Carmel

Camper Name: \_\_\_\_\_ Age: \_\_\_\_\_ ☐ Male ☐ Female  
Address: \_\_\_\_\_ Parent/Guardian Name: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Parent/Guardian Phone: \_\_\_\_\_  
Policy Holder Name: \_\_\_\_\_ Insurance Provider: \_\_\_\_\_  
Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_  
Family Doctor Name: \_\_\_\_\_ Family Doctor Phone: \_\_\_\_\_

#### Camper Health Information:

Height \_\_\_\_\_ Weight \_\_\_\_\_ Date of last Tetanus Booster: \_\_\_\_\_

Notable Medical Conditions and/or Physical Restrictions:

\_\_\_\_\_  
\_\_\_\_\_

Medications and Instructions (Including over-the-counter medications, such as Advil, allergy medications, etc.) (Please note: *All medications must be presented to Camp Manager in their clearly labeled, originally prescribed container. The Camp Manager reserves the right to turn down any medication that is not in its clearly labeled, originally prescribed container.*):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Allergies: ☐ Bee Stings ☐ Penicillian ☐ Food ☐ Other (please specify): \_\_\_\_\_

\_\_\_\_\_

Additional Medical Information and Dietary Restrictions: \_\_\_\_\_

\_\_\_\_\_

If parents/guardians are unavailable, I hereby authorize the Camp Manager or Camp Director to contact the camper's emergency contact listed on the Camper Registration Form:

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Authorization for Emergency Medical Care**

I hereby give my permission to the Camp Manager, Camp Director, and other Camp officials to call a doctor or emergency medical service and for the doctor, hospital, or medical service to provide emergency medical or surgical care for my child, \_\_\_\_\_ (first and last name), should an emergency arise. It is understood that the camp officials will make a conscientious effort to locate the parents/guardians or emergency contacts listed on the Camper Registration Form before any action is undertaken. If it is not possible to locate parents/guardians or emergency contacts listed, I/we accept the expense of emergency medical or surgical treatment (to the extent that it is not covered by my child/youth's healthcare insurance or the limited provided camp insurance).

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Photo Release and Liability Release Form

## Winter Camp at Camp Carmel

### Photo Release:

I grant Camp Carmel and Camp Placid the right to take photographs and/or videos of my family, my child(ren), or myself in connection with the camping program. I authorize Camp Carmel and Camp Placid to copyright, use, and publish the same in print or electronically. I agree that Camp Carmel and Camp Placid may use such photographs and/or videos for any lawful purpose, including for publicity, illustration, advertising, and web content. I understand that photos and videos can be used as promotional materials and shared via social media. I acknowledge that no child's full name will be used in the publishing of these photos/videos without prior permission from the parent/guardian.

I have read and understand the above:

Printed Name: \_\_\_\_\_ ☐ Camper ☐ Camp Leader

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Liability Release:

I hereby acknowledge that my camper will be expected to participate in all camp activities; if there are any activities I do not want my child to be involved in, I have listed them below. I understand and hereby agree to assume all the risks which may be encountered on camp activities, including activities preliminary and subsequent thereto. I do hereby agree to hold Camp Carmel, Camp Placid, the Southeastern District Church of the Brethren, the Southern Region of the Covenant Brethren Church, and its agents and employees harmless from any liability, actions, causes of actions, claims, expenses, and damages on account of injury to my child or property, even injury resulting in death, which I now have or which may arise in the future with the activity or participation in any other associate activities. I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by law of the State of North Carolina and the State of Tennessee and that if any portion is help invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto, and the terms of the release are contractual and not a mere recital. I further state that I have carefully read the forgoing releases and know the contents thereof and sign this release as my own free act. This is a legally binding agreement which I have read and understood.

Activities I do not permit my child to participate in: \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Coronavirus Liability Waiver

Dear Parent/Legal Guardian:

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. As a result, federal, state, and local governments and agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. We are doing everything we can to comply with all regulations and ensure your safety. We put in place preventative measures to reduce the spread of COVID-19, but we cannot guarantee that you or family members will not become infected with COVID-19.

By participating in programs, services, and activities of our organization, you agree to the following:

On behalf of yourself and your children, you hereby release, covenant not to sue, discharge, and hold harmless Camp Carmel, Inc., its employees, agents, and representatives, of and from all liabilities, claims, actions, damages, costs, or expenses of any kind arising out of or relating to your participation in our programs, services, or activities. You understand and agree that this release includes any claims based on the actions, omissions, or negligence of this organization, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any hosted or programmed event by this organization.

Parent Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Names of Minors:

_____	_____
_____	_____
_____	_____
_____	_____

## **Additional Information Regarding Winter Camp**

\*Inclement Weather policy: Our area of the Blue Ridge Mountains is known for unpredictable winter weather. In case of ice or snow that makes it dangerous for campers or parents to travel to Linville, NC, Winter Camp may be canceled, postponed, or moved to an alternate location. All pre-registered campers' parents will be notified promptly of any weather-related changes. Please use extra caution when driving in the winter, regardless of weather conditions. Please reach out to Erica with any questions: [campcarmel1952@gmail.com](mailto:campcarmel1952@gmail.com) or text/call (828) 817-3708.

### **\*Winter Camp Packing list:**

- Bedding for twin-sized mattress (sheet, blankets or sleeping bag, pillow)
- Weather appropriate clothing (coat, boots, hat, gloves, etc. - PREPARE FOR OUTDOOR ACTIVITIES)
- Bible, journal, writing utensils
- Toiletries, bath towels
- Flashlight
- Pajamas
- Extra clothing
- Medication in it's originally prescribed container (to be turned into Camp Manager)

### **\*FAQs:**

- 1) Where will campers stay during winter camp?
  - All campers will sleep in the main lodge. Girls and female leaders will all stay upstairs, boys and male leaders will all stay downstairs.
- 2) Can my camper use his/her cell phone during camp?
  - We do not allow campers to keep their cell phones during camp. Upon arrival, they may choose to leave it with either their parents or the Camp Manager. If you would like to hear from or check-in on your camper throughout the week, please pre-arrange this with the Camp Manager, Erica. She can be reached via email at [campcarmel1952@gmail.com](mailto:campcarmel1952@gmail.com) or by text/call at (828) 817-3708.
- 3) When is drop-off and pick-up?
  - Drop-off begins at 5pm on the evening of the 27th. If possible, please have all campers present by 6:30pm for supper/gathering together. Pick-up will be from 10am-11am on the morning of the 30th. If you need to drop-off or pick-up your camper outside of designated times for any reason, please pre-arrange this with the Camp Manager, Erica. She can be reached via email at [campcarmel1952@gmail.com](mailto:campcarmel1952@gmail.com) or by text/call at (828) 817-3708.
- 4) What if I am unable to arrange drop-off or pick-up for my camper during the weekdays?
  - We have plenty of people who are willing to give rides to campers from many different areas. If you need help finding a ride for your camper, please contact the Camp Manager, Erica for guidance. She can be reached via email at [campcarmel1952@gmail.com](mailto:campcarmel1952@gmail.com) or by text/call at (828) 817-3708.

**We look forward to camping with you!**