

KINGDOM KIDS KAMP

July 3-6, 2011

United Christian Youth Camp

Prescott, Arizona

Building Meaningful Connections:

One Adventure at a Time

Pilgrim Rest Baptist Church

1401 E. Jefferson Street Phoenix, Arizona

602.258.0831

Shilise Stafford, Director of Children's Ministry
Elder Jerry Barnes, Christian Education

Bishop Alexis A. Thomas, Senior Pastor

Kingdom Kids Kamp 2011 Registration & Orientation Packet

I. Welcome

- a. Pilgrim Rest Baptist Church Children's Ministry
- b. Bishop Alexis A. Thomas

II. Kamp...what should we expect?

- a. Camp Scene
- b. July 3-6, 2011
- c. Meals & Snacks
- d. Activities: chapel, VBS classes (the parables of Jesus), rock climbing, star gazing, bon fires, fireworks, hiking, parties and much MUCH more.
- e. Counselors
- f. Homesick...you or them?

III. Kamp Theme

- a. Building Meaningful Connections: One Adventure at a Time

IV. Who is paying for this?

- a. Can I afford camp?
- b. Payment plans...

V. Registration Documents

- a. Page by page (complete means COMPLETE)

VI. Questions, comments and/or concerns

- a. FYR: director, Shilise Stafford~602.258.0831 or 602.257.5062
BWC: *(kingdomkids@pilgrimrestphx.org or sstafford@pilgrimrestphx.org)*
- b. Want to volunteer?

VII. Conclusion & Registration



Registration Packet...

You Keep:

You Turn In:

Kamper Information Sheet

Welcome to Kingdom Kids Kamp 2011! This year we will focus on Building Meaningful Connections: One Experience at a Time. Please complete the information in this packet honestly and legibly. We understand that the information you are sharing may be sensitive. Please know we will handle your privacy with a high level of care.

Camper Name _____

Gender _____ Age _____ Birthday _____ / _____ / _____

Parent/Guardian (please print) _____

Phone (H) _____ Phone (W) _____

Phone (C) _____

Address _____ City _____

Email (for confirmation & communication purposes)

_____ @ _____

Please note parent communication will happen primarily through email contact please write your email address legibly. If you do not have an email address you should remain in close watch of the church's webpage for potential camp updates.

Second Parent/or Alternate Emergency Contact _____

Phone (H) _____ Phone (W) _____ Phone (C) _____

\$\$ Fees: In order to secure your child's place at camp you must pay the initial deposit at the time of registration and make the final payment for the balance owed on or before June 3, 2011 (5:00pm). Please note that the initial deposit of \$50.00 is non-refundable. If you make payments past the deposit and decide to cancel your child's trip you must do so in writing on or before May 15, 2011 in order to receive any money paid after the deposit. _____ Initial

Kingdom Kids Kamp – Parent Questionnaire

Thank you for taking the time to complete this questionnaire. Please answer all questions honestly to help us place your child with the correct counselor. Incomplete packets will be returned.

Name of camper _____ Age _____

Nick Name (or preferred name of camper) _____

Gender _____ Grade _____ Birthday (month/day/year) ____/____/____

T-shirt size (circle 1) Youth sizes: XS S M L XL Adult sizes: XS S M L

Has your child ever been to camp before? _____ Where? _____ When? _____

If not, has your child ever been away from home for more than two days? _____

Who lives in the home with your child? Please mark all that apply.

Father/guardian _____

Mother/guardian _____

Brothers {(name(s) and age(s)} _____

Sisters {name(s) and age(s)} _____

What is your child like at home? (shy, outgoing, strong-willed, calm, sensitive, easygoing, restless, alert, moody, aggressive)

What responsibility does your child carry at home? (i.e. household chores, etc.) _____

Does your child like school? Yes ___ No ___ If not, why? _____

If your child has problems with or at school, please describe them. _____

Would you say that your child makes friends _____ easily _____ uneasily

If uneasily please explain _____

What are your child's greatest interests? _____

Kingdom Kids Kamp - Parent Questionnaire

We understand that the information you are releasing is sensitive. Take comfort in knowing that the information will be guarded for your child's privacy. We will share it only as necessary to meet the needs of your child to ensure he/she has a great time at camp. We use this information to help match your child with the best possible counselor.

Are there any special facts that we should know in order to better understand and help your child? (physical or learning disabilities, hyperactivity, depression, fears, bed wetting, etc.)

Please list any food allergies or dietary needs that your child has so that our counselors can help him/her make good choices at meal and snack time. Please share any other advance information that you feel the leaders or counselors should know about your child.

It is the goal of the camp staff to help assist your child in building meaningful connections while away first with God and then with peers and adults. Please list any additional information that would be important for camp staff to know (i.e. trouble making or keeping friends, easily distracted, leader, distrust of adults, strong personality, etc.).

My child has (check all that apply):

not accepted Christ accepted Christ been baptized

Camper Mate Preferences (up to three requests; must be in the SAME age/gender group). We will try to accommodate a request to be placed with at least one of the requested cabin mates; however, we cannot guarantee it. We ask that you prepare your child to make new friends and then leave it in God's hands.

Kingdom Kids Kamp-Medical Release and Liability Form

Camper's Name: _____ Birthday _____/_____/_____

Gender: _____ Age: _____ Parent(s) Name (Printed) _____

I (We) acknowledge that my child's participation in the activities of PRBC Summer Camp 2011 is voluntary and may require traveling and participation in physical exertion. My child has permission to participate without restriction in all PRBC Summer Camp activities, which may include, but are not limited to, the following: cookouts, swimming, hiking, soccer, volleyball, softball, basketball, rock climbing, zip line, paintball and camping. In consideration of the activity or event in which my minor child is involved, I hereby represent and warrant that my minor child is physically and medically capable of fully partaking in any activity or event and acknowledge that accidents, injuries, death and/or damages caused by other individuals may occur. It is my consent on behalf of my minor child to acknowledge and assume such possibility and I/we hereby release and forever discharge and hold harmless Pilgrim Rest Baptist Church, Pilgrim Rest Foundation, Inc., its' officers, employees, Pastor, elders, associate ministers, ministry leaders, volunteers and representatives from all claims, damages, injuries, medical treatment expenses, medical transportation expenses and causes action that may arise from the event or activities. I/we hereby also release, discharge and hold harmless United Christian Youth Camp and its' associates, officers, employees and representatives from all claims, damages, injuries, medical treatment expenses, medical transportation expenses and causes action that may arise from the event or activities.

I(We), the parent(s) or legal guardian, do hereby authorize any one or more members of Pilgrim Rest Baptist Church, in whose care the minor has been entrusted as agents for myself in my absence or incapacitation, to consent to any medical treatment, emergency surgery, anesthesia, x-rays or other necessary treatment(s), which are deemed advisable by and are to be rendered under the general or special supervision of any physician, physician's assistant, licensed practical nurse, EMT or surgeon licensed under the provisions of the Medical Practice Act on the medical staff of any hospital or outpatient clinic, whether or not such diagnosis or treatment is rendered at the office of said physician or medical staff or at said hospital.

The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical and/or dental services rendered, including emergency medical transportation, to the aforementioned child pursuant to this authorization.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of the aforesaid agents to give specific consent to any and all such diagnosis, treatment or hospital care which aforementioned physician in the exercise of his or her best judgment may deem advisable.

I hereby authorize any hospital or physician that has provided treatment to the above-named minor to surrender physical custody of such minor to above-named agents upon the completion of treatment.

The provisions of this medical release and liability form shall remain in effect from July 3-7, 2011.

The original form shall remain present at the camp with the appropriate staff and a copy with the parent or guardian who executed the form. Please note that a copy of this form shall have the same force and effect as the original.

Parent(s)/Legal Guardian Signature _____ Date _____

Identification Type _____ # _____

Any photographs taken of children are used solely for non-commercial reasons for the promotion of PRBC and PRBC Children's Ministry. Your signature here, as parent, gives consent for your child to be photographed for website, brochures, and other written communication. Parent /Guardian Signature _____ Date _____

Kingdom Kids Kamp- Health & Emergency Information Form

Please print neatly

Camper Name _____ Gender _____ Age _____

Parent/Guardian (please print) _____

Phone (H) _____ Phone (C)/Alternate _____

Second Parent/or Alternate Emergency Contact _____

Phone (H) _____ Phone (C)/Alternate _____

Medical Insurance Carrier _____

Policy # _____ Group # _____

Name of insured person _____

Health History (check) frequent ear infections diabetes hypoglycemic bleeding disorders
 allergies heart defect/disease asthma seizures ADD/ADHD menstrual cycle
other (specify) _____

Drug allergies (specify): _____

Food allergies (specify): _____

Chronic/recurring illness/medical conditions including mental illness (depression, anxiety, etc.) Please explain briefly.

Dietary Restrictions (medical and non-medical) _____

Current Medications (list all prescriptions, OTC and herbal) _____

Current Medical Equipment Needed _____

Describe your child's swimming ability:

non-swimmer beginner intermediate advanced

Initial _____ I give my permission to the staff administrator or nurse to administer Tylenol/acetaminophen, ibuprofen, Benadryl or over the counter antacids, as needed.

Initial _____ My child may sleep on a top bunk.

Kingdom Kids Kamp- Camper Release

Your child's safe return from camp is of great concern to us. Only the person(s) you name on this form will be allowed to pick up your child, and only on the date specified, unless you are called and asked to pick up your child before that specified date. Please fill out the form below with the information requested.

Child's Name _____

My child will be picked up from the church by: (PHOTO ID WILL BE REQUIRED FOR RELEASE)

_____ A parent or legal guardian _____

_____ other authorized individuals _____

Parent Name _____

Phone _____

Parent Signature _____

Note: If the person(s) whom you list become unable to pick up your child, you must call the camp director (Shilise Stafford 602.257.5062). We will not release your child to any person not on this form.

ADMIN. USE ONLY	
Change of Instructions:	
Caller: _____	Date/time: _____
Received by: _____	
Changes:	

Kingdom Kids Kamp– Camper Information

Departure Day:

Pilgrim Rest Baptist Church: 1401 E. Jefferson Street Phoenix, Arizona 85034

Campers will meet at Pilgrim Rest Baptist Church Sunday, July 3, 2011 at 2:30pm. The bus will depart for Prescott, AZ (PRBC Summer Camp) promptly at 3:00 p.m. Please plan for an on-time arrival. Once registration has closed no additional campers will be permitted to sign-in. Please provide lunch for your child before arriving for departure. Campers will eat dinner at camp.

Have the following ready to be collected prior to registration Sunday, July 3rd:

- Luggage (**all children must be able to carry/roll their own luggage**). There is NO closet space. All clothes should be labeled and in easily accessible luggage.
- ALL medications (prescription and non-prescription) need to be placed in a Ziploc bag with child's first & last name clearly displayed with a permanent marker. According to state law, prescription medications must be in the original bottle and labeled by the pharmacist with doctor's instructions. All medications will be dispensed by the nurse. Any exceptions to this rule are made only with permission of the nurse. Over-the-counter medications will be available from the nurse if needed. *Campers will have their medications returned to them, and packed in their bags, before leaving camp on July 6th.
- ALL medical equipment needs to be clearly labeled with child's first & last name. All necessary medical equipment will need to be turned in to nurse prior to loading the bus. The nurse will use the provided equipment along with the medicine to dispense as needed.
- Spending money is NOT needed by campers for any camp activities. We will provide one drink and snack each day for each camper. Do NOT send your camper with money, snacks, food or candy.

Illness or Accident at Camp:

We will call you if your child is sick enough to be in the infirmary more than 24 hours, or sick or injured enough to be taken to see a doctor.

Return Day:

Campers will return to PRBC on July 6, 2011 at approximately 7:00 p.m.

Cancellations:

If your child becomes unable to attend, please notify Camp Director (Shilise Stafford 602.257.5062) immediately so that someone on the waiting list may attend camp. All cancellations must be made prior to May 15, 2011 (in writing) in order to receive a refund. Please remember that deposits are non-refundable.

Note:

NO money, food, beverages, or valuables are allowed on this trip. If any of these items are found they will be confiscated.

ALL items belonging to your child should be marked with a permanent marker. Children are responsible for ALL of their belongings. Be sure to stress to your child the importance of keeping up with their belongings.

Kingdom Kids Kamp~ Other Important Kamper Information



Payment

In order to secure your campers place at camp you must pay the initial deposit at the time of registration and make the final payment for the balance owed on or before June 3, 2011 (5:00pm), NO EXCEPTIONS. Please note that the initial deposit of \$50.00 is non-refundable. If you make payments past the deposit and decide to cancel your child's place at camp you must do so on or before May 15, 2011 (in writing) in order to receive any money paid after the deposit.



Mail

It's always fun to get mail at camp. We will not be able to receive regular snail mail at camp. However, you can send mail to your child with staff and we can deliver it to your child throughout the week. It must be clearly labeled in a Ziploc bag with the child's complete name and age. Turn it in the day of departure during registration to ensure its proper placement. *Please read the article regarding Homesickness before writing your mail to ensure that your mail will not upset your child at camp.



Email

Should you need to notify the camp director of an emergency use: kingdomkids@pilgrimrestphx.org. Children will not be able to receive email at camp. This email should be used to communicate with the camp director for emergency purposes only.



Telephone

Campers cannot receive or make phone calls. Be assured we will not hesitate to call you if it is necessary. The emergency number for the camp director is 602.257.5062; you may leave a message at this numbers.

Kingdom Kids Kamp- Packing Checklist

*****REMEMBER:** Your child must be able to carry or roll his/her own luggage; be sure you consider this when purchasing or packing luggage. There is no closet.

- | | |
|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> Sleeping bag bedroll (blankets and sheets) | <input type="checkbox"/> Comb, brush, shampoo |
| <input type="checkbox"/> Fitted sheet to go over mattress –twin size | <input type="checkbox"/> Toothbrush, toothpaste |
| <input type="checkbox"/> Pillow with a pillowcase | <input type="checkbox"/> Soap, 2-3 washcloths & 3-4 towels |
| <input type="checkbox"/> Sleepwear or pajamas | <input type="checkbox"/> Plastic bag to take home wet clothes |
| <input type="checkbox"/> Undergarments & socks – for each day
○ (Suggest 6 each) | <input type="checkbox"/> Laundry bag (optional) |
| <input type="checkbox"/> Modest shorts & shirts – for each day
○ (Suggest 6 each) | <input type="checkbox"/> Bible, spiral notebook, pens/pencils |
| <input type="checkbox"/> Jeans or pants – at least one pair | <input type="checkbox"/> Insect repellent-suggest a cream or non-aerosol for safety |
| <input type="checkbox"/> Jacket, sweatshirt (hoodie) or long-sleeve | <input type="checkbox"/> Sunscreen (SPF 45 or higher recommended) |
| <input type="checkbox"/> 2 pair of tennis shoes (sneakers), just in case
○ one pair gets wet (no sandals or clogs) | <input type="checkbox"/> Flashlight & fresh batteries |
| <input type="checkbox"/> Water or beach shoes for swimming at pool
○ and showering | <input type="checkbox"/> Hat- for the sun (optional) |
| <input type="checkbox"/> Red, White & Blue (4 th of July party) | <input type="checkbox"/> Single use camera (optional) |
| <input type="checkbox"/> “Camp Rock” Party | <input type="checkbox"/> Modest bathing-suit (one piece only for girls) |
| <input type="checkbox"/> Feminine hygiene products (if necessary) | <input type="checkbox"/> Swim trunks AND tank or tee for boys |

Foot Care: Closed toe and closed heel shoes such as tennis shoes are required for all activities at the camp outside of swimming and are recommended to keep toes and ankles from being injured. Socks are highly recommended.

ALL Electronics INCLUDING cell phones are not permitted.

If found they will be confiscated and returned after camp.

Kingdom Kids Kamp- Camper Behavior Contract

Behavior Contract

Campground dress code: Campers should dress modestly. Modest attire is required throughout the camp. T-shirts advertising alcohol or tobacco products or having any message that promotes illicit or illegal activities may not be worn. All undergarments must be fully and completely covered at all times. Shorts need to be long enough to fully cover the rear and should come to the mid-thigh; "daisy dukes" are not permitted. No part of the belly should be exposed or off-shoulder shirts. Bathing suits should be modest and must be one-piece, no bikinis. Boys should wear swim trunks, no Speedos. Boys must also wear a tee shirt or tank while swimming. Any swimsuit not meeting modesty standards will prevent a camper from being able to swim. Sandals are not permitted. Swimming shoes are highly recommended during showering and swimming.

Camper Behavior Policies and Expectations: Campers are expected to respect the feelings and rights of others. We will hold campers accountable for how they speak to and treat others. Profanity is not acceptable. Insubordination or defiance toward a staff member will not be tolerated and may result in parents having to pick-up their child from camp. Pranks will not be permitted. Failure to remain within the established physical boundaries of camp is a serious offense. Serious offenses can result in dismissal and the need for the parent/guardian to retrieve the camper from the camp. Dismissal from the camp may also result in the participant being excluded from future activities.

I have read and understand the above policies. I am aware that I will be held responsible for my child's actions during his/her stay at camp. If my child's behavior or actions result in the damage of any property or the incurrence of any fines I understand that I will incur the cost of replacing the damaged property or paying any assessed fine. I understand that I will be made aware of a problem before the decision to remove my child from camp is made.

Date _____ Parent Signature _____

I have read and understand the above policies. I am aware that I will be held responsible for my stay at camp. I also understand that not following these policies means I could be sent home early from the camp.

Date _____ Camper Signature _____

Payment Information: ADMIN. USE ONLY

Paid In Full: YES/ NO

Deposit: YES / NO

Making Payments: YES/ NO

Payment received: ____/____/____ \$ _____ ____/____/____ \$ _____

____/____/____ \$ _____ ____/____/____ \$ _____

Payment Type: CASH

CHECK (made payable to PRBC)

CREDIT

SPONSORED

Kingdom Kids Kamp- Camper Behavior Contract (PARENT COPY)

Behavior Contract

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Building Meaningful Connections: One Adventure at a Time



Sample Camper Daily Itinerary

Time	Class	Participants
6:30	Rise, Shine & Devotion (getting dressed & showered)	Whole
7:45	Breakfast	Whole
8:45	Church	Whole
10:00	Group Breakout: Class 1	Group
10:40	Snack	Whole
11:00	Group Breakout: Class 2	Whole
12:00	Lunch	Whole
1:10	Downtime	Whole
2:00	Swim & Recreation Room Time	Whole
4:00	Building Meaningful Connections: Group Activity	Whole
5:00	Dinner	Whole
6:00	Chapel	Whole
7:45	Evening Fellowship/4 th of July	Whole
9:00	Primary head to dorms; lights- out 9:15 pm	Group
9:15	Juniors head to dorms: lights-out 9:30 pm	Group
9:40	Tweens head to dorms; light-out 10:00 pm	Group