

# 2009 Summer Teen Camp

## CONSENT AND RELEASE FORM

June 1 - 5, 2009

I, the undersigned parent or guardian, hereby consent to my child, \_\_\_\_\_, who is \_\_\_\_\_ years of age, participating in the activities connected with the trip to and from and the time at Summer Teen Camp at the Camp at Old Mill in Coatesville, PA, an activity sponsored by Capitol Baptist Church from Monday, June 1, through Friday, June 5, 2009. I certify that my child is able to participate in these activities, including sports and swimming (unless otherwise indicated).

**I understand and hereby agree to assume all of the risks which may be encountered on said activities, including activities preliminary and subsequent thereto.** I do hereby agree to hold Capitol Baptist Church and its agents and employees, harmless from any and all 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 in connection with the activity or participation in any other associated activities.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between parties hereto, and the terms of this release are contractual and not a mere recital.

I further state that **I have carefully read the foregoing release and know the contents thereof and I sign this release as my own free act.** This is a legally binding agreement which I have read and understand.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

# 2009 Summer Teen Camp

## MEDICAL RELEASE FORM

June 1 - 5, 2009

Name \_\_\_\_\_ ☐ Male ☐ Female  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Attending with (group name) \_\_\_\_\_ City \_\_\_\_\_  
Parent/Guardian \_\_\_\_\_ Phone \_\_\_\_\_  
Alternative Emergency Contact \_\_\_\_\_  
Phone \_\_\_\_\_

### MEDICAL INFORMATION

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Insurance \_\_\_\_\_  
Policy Number \_\_\_\_\_  
Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_  
Are there any physical or medical conditions or restrictions? \_\_\_\_\_ If yes, please explain and indicate their nature and extent: \_\_\_\_\_  
\_\_\_\_\_

Any medications brought to camp? \_\_\_\_\_ If yes, please list each and indicate needed dosage: \_\_\_\_\_  
\_\_\_\_\_

Is your child allergic to any medications (please list) \_\_\_\_\_  
\_\_\_\_\_

May your child be given the following: Tylenol? \_\_\_\_\_ Ibuprofen? \_\_\_\_\_  
Pepto Bismol? \_\_\_\_\_ Cough Drops? \_\_\_\_\_ Benadryl? \_\_\_\_\_

In case of an emergency, I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child. In the event that neither parent/guardian can be reached in the case of an emergency, I waive my right to informed consent of treatment. I hereby release Capitol Baptist Church of all liability.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Capitol Baptist Church  
401 Kesselring Ave • Dover, DE 19904 • (302)734-2410  
Terri Howard Moore, Pastor • Woody Bates, Youth Pastor

# **2009 Summer Teen Camp**

## **CAMP STANDARDS**

### **GENERAL INFORMATION**

The standards we have are Biblically based and are to be upheld by all campers and visitors. Knowing these policies before you come to our camp will help you decide whether this is the place for you to attend camp or to send your young people. Following these rules while at the campgrounds will help you to have a more enjoyable visit. Please read them carefully.

### **ALL CAMPERS**

Campers are not to bring alcoholic beverages, tobacco in any form, radios, tape or CD players, computers, cell phones, books or magazines, knives, guns or weapons of any kind, video games, fireworks, or pets. Shirts with questionable pictures or emblems are also not allowed. Mixed swimming is not permitted. No medication is to be kept by the campers. All medication will be turned in at the camp office upon arrival. No physical contact is allowed between male and female campers. Any camper failing to comply with the camp rules will be sent home at the individual's or church's expense.

### **YOUNG LADIES**

Ladies are required to wear modest skirts, dresses, and "skirt-appearing" culottes which fall to the bottom of the knee. No slits in skirts are to be above the knee. A modest one-piece bathing suit worn underneath culottes and a dark-colored t-shirt is acceptable for swimming. No sun dresses or cropped tops. No pants, gauchos or shorts. Casual dress clothes are required for evening services.

### **YOUNG MEN**

The following types of clothing are NOT to be worn: see-through or mesh-like material shirts, sleeveless shirts, sweat pants, oversized pants worn low on the hips, modern or faddish styles of clothing. Jeans or casual pants ARE allowed. Knee-length cut-offs or shorts worn with a dark t-shirt are acceptable for swimming. Collared shirt required for evening service. Men will not be allowed to wear earrings, necklaces, or any piercings. Hair must be off the ears, collar, and no dyed or carved hair styles.