

Children's Camp

2015



**"Your word is a lamp unto my feet and a
light to my path." Psalms 119:105**

July 6-11

**For students ages 8-11
3rd—6th Grade**

Sponsored By: **Community Bible Chapel**
418 E Main St. Richardson TX 75081
For more information contact Dan Williams
Phone: 972-671-3428 x22
Email: danw@communitybible.org
Website: www.communitybible.org

Children's Camp

Jan-Kay Ranch offers an unforgettable camping experience!

Swimming	Football	Fishing
Riflery	Archery	Volleyball
Waterslide	Horseback Riding	Canoeing
Nature Trails	Team Games	Hayride
Horseshoes	Exotic Animals	Crafts
Paddle Boats	Roller Hockey	Basketball

And lots of free-time...time to make new friends, relax and enjoy nature.

CASTLES AND KINGS

He who did not spare His own Son, but delivered Him up for us all, how shall He not with Him also freely give us all things? Romans 8:32

CAMP ALSO INCLUDES; TWO CRAFT PERIODS PER DAY, BIBLE STUDY TIMES, AND PLENTY OF GROUP ACTIVITIES.

Questions and Answers

- Q:** Who can come to camp and what should they expect?
- A:** For Students ages 8 years (entering 3rd grade) through 11 years (entering 6th grade). Rules for acceptance and participation in the camping program at Jan-Kay Ranch are the same for everyone without regard to race, color, age, sex, handicap, or national origin.
- Q:** When should I send in my registration and deposit?
- A:** Register as soon as you can. All age levels (male and female cabins) have limited space. **The deadline for registration and final payment is June 28** Two to four weeks before camp, an information letter will be sent to you with specifics on when camp begins, what to bring, transportation details, etc.
- Q:** Accommodations, Supervision and Insurance Coverage?
- A:** Campers will stay in fully enclosed cabins with air conditioning. Each cabin has at least one mature adult counselor. All campers that are not covered under their own health insurance policy will be protected by accident insurance up to \$2,500.
- Q:** What about mail and phone calls?
- A:** We believe mail is important to every camper. Please send **camper mail** to:

Camper's Name
C/O Jan-Kay Ranch
436 Private Road 5001
Detroit, Texas
75436

← **Do not send your registration form to this address!**

Phone: 903-674-3159 (Emergency calls only, please)

It is our hope and prayer that Children's Camp at Jan-Kay Ranch will be used by and for the Lord to bring many to know Jesus Christ as Savior and to help Christians mature in the things of Christ.

COST — \$265

Scholarships available upon request
Contact Dan Williams at 972-671-3428 x22

Registration

Jan-Kay Ranch Visitation Policy: No Visitors

Please fill out the registration form carefully. Complete the **HEALTH INFO** and the **REGISTRATION INFO**, then **SIGN** the **RELEASE** on the back of this form.

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Home Phone: (____) _____
Emergency Phone # 1: (____) _____
Emergency Phone # 2: (____) _____
Cabin Mate? _____
Sex: Male _____ Female _____ Age _____
Grade (next year) ____ Birth Date: _____
Church? _____
Shirt Size: **Youth:** M, L, **Adult:** S, M, L, XL

Health Information

▪ Does the camper have any of the following: Answer "Yes" or "No"
Heart Trouble _____ Lung Trouble _____ Ear Trouble _____
Asthma _____ Hernia _____
Skin Problems or allergies _____ (Specify) _____
▪ Has the camper had any of the following:
Mumps _____ Scarlet Fever _____ Chicken Pox _____
Measles _____ Appendicitis _____ Whooping Cough _____
Has the camper had a tetanus shot in the last 3 years? _____
If the camper needs to be excluded from any activities, please indicate here.

▪ Does the camper take any medicine? _____ (List ALL medications)
Medication: _____ Treatment for: _____
Medication: _____ Treatment for: _____
Medication: _____ Treatment for: _____

(If you need additional space, please attach a separate sheet with all medical details.)

ALL MEDICATIONS MUST BE GIVEN TO CAMP NURSE.

▪ Is the camper allergic to any medication? _____ (Specify) _____

▪ Does the camper need any injections? _____

(If so, **SPECIAL ARRANGEMENTS MUST BE MADE before camp.**)

Family Doctor: _____

Health Insurance Carrier: _____

Policy # _____

**** Please enclose a copy of your insurance card with your registration ****

Release & Deposit

Complete below as well as enclosed Jan-Kay Release

MEDICAL: In case of emergency, and the Undersigned is incapacitated and unable to do so for himself/herself, or if Undersigned is under 18 and parent or guardian cannot be reached, the Undersigned authorizes Community Bible Chapel personnel to call for medical care for the Participant or to transport Participant to a medical facility or hospital if, in the opinion of such personnel, medical attention is needed for Participant. The Undersigned further gives permission to the physician in charge to secure proper treatment and to order injections, medication, anesthesia, or surgery for the Undersigned.

ADVERTISING: Community Bible Chapel shall have the non-exclusive right, without limitation as to time, to use and display of the camper's name, voice and likeness for the purpose of promoting, publicizing and advertising the Camp.

PERMISSION: Signature of Parent of Guardian, approving attendance and indicating that this camper is medically able to be involved in the CBC camp program.

LIABILITY RELEASE: The Undersigned hereby releases, indemnifies, and holds harmless Community Bible Chapel, their agents and employees, from and against any liability, claims, actions and causes of action whatsoever arising out of or related to any loss, damages or injury, that may be sustained by the Participant while involved in above activity/outing, except to the extent caused by the negligence, gross negligence or willful misconduct of Community Bible Chapel, their agents or employees.

Signature (parent or guardian)

Date

Print Name (parent or guardian)

- I have enclosed my **deposit**.
- I have enclosed my **total payment**.
- I am requesting a **scholarship**.
- I have enclosed copy of **insurance card**.

Please include a **\$25.⁰⁰ deposit** with this Registration form. Your deposit will be applied to the cost of camp and your **remaining balance is due and payable on/before June 28 in the CBC Office. Don't forget to include a copy of your insurance card!**

**SEND COMPLETED FORM W/ DEPOSIT AND A COPY
OF YOUR INSURANCE CARD TO:
CBC CHILDREN'S CAMP 2011
418 E Main Street
Richardson TX 75081**

JAN-KAY RANCH, INC.
CAMPER MEDICAL AND RELEASE FORM - SUMMER CAMP

MAIN CAMPER NAME: _____ DOB: _____ M or F: _____
All Other FAMILY MEMBERS attending the SAME CAMP SESSION with the MAIN CAMPER:

OTHER CAMPER NAME: _____ Relation to Main Camper: _____ DOB: _____ M or F: _____

OTHER CAMPER NAME: _____ Relation to Main Camper: _____ DOB: _____ M or F: _____

OTHER CAMPER NAME: _____ Relation to Main Camper: _____ DOB: _____ M or F: _____

ADDRESS: _____ Email: _____

Name of Medical Insurance Co: _____ Group #: _____ Name of Insured: _____
Please notify in case of emergency:

1. Name: _____ Phone: _____ Relationship: _____

2. Name: _____ Phone: _____ Relationship: _____
(if necessary, please use the back of this paper to record additional information)

I, my child and/or my family (herein known as the "Camper") will be attending summer camp at JAN-KAY RANCH on the dates of _____ under the supervision of _____ (herein known as the "Sponsoring Organization"). I hereby authorize Jan-Kay Ranch and/or the Sponsoring Organization to make arrangements for or give any medical attention to the Camper, emergency or otherwise, that is deemed necessary under the circumstances by the sole discretion of Jan-Kay Ranch and/or the Sponsoring Organization. I hereby give permission to the physician selected by Jan-Kay Ranch and/or the Sponsoring Organization to hospitalize and/or secure proper treatment as the physician may deem appropriate. I further understand that medical treatment may be several minutes away in the event of a medical emergency.

SIGNATURE OF CAMPER OR LEGAL GUARDIAN OF CAMPER if Camper is under 18 years of age DATE

The proposed activities provided by Jan-Kay Ranch and/or the Sponsoring Organization (herein known as the "Recreational Activities") require participation in physical exercises which are physically demanding. Many of the activities will challenge the Camper and cause surges in blood pressure and pulse rates. It is imperative that the Camper is free of any diseases or injuries, heart related or otherwise, which might create undue risks to themselves and/or to any other participants. The Recreational Activities provided by Jan-Kay Ranch and/or the Sponsoring Organization may include, but are not limited to, the following list; indoor and outdoor games, boating, fishing, swimming, 20' water slide, obstacle course, exotic animal park and horse back riding. The horse back riding activities include a trail ride and/or riding in the arena, this will be decided by the Head Wrangler. All Campers participating in the Recreational Activities may be exposed to the elements of nature, including temperature extremes and inclement weather.

I certify that the Camper is in good health, physically and mentally, to the best of my knowledge and from past health examinations for the participation in the Recreational Activities.
List any medical concerns including allergies:

Date of last Tetanus shot

Name ALL medications the camper is currently taking: _____

SIGNATURE OF CAMPER OR LEGAL GUARDIAN OF CAMPER if Camper is under 18 years of age DATE

Under Texas Law (Chapter 87, Civil Practice and Remedies Code), An Equine Professional is not Liable for an Injury to or the Death of a Participant in Equine Activities Resulting from the Inherent Risks of Equine Activities.

I hereby acknowledge that during the Camper's voluntary participation in the Recreational Activities, that certain risks and dangers may occur due to accidents, which include, but are not limited to, the hazards of depending on other people, being at various places, activities in remote places without medical facilities, the forces of nature, loss or damage to personal property, physical and/or mental injury, not excluding fatality. I hereby assume all mentioned risks and those which are not specifically foreseeable, and will hold Jan-Kay Ranch, including its staff and Board of Directors, and the Sponsoring Organization harmless from any and all liability, claims and demands of every kind whatsoever, whether for bodily injury, property damage or otherwise, which may arise from or in connection with the Camper's participation in any activities arranged by Jan-Kay Ranch or the Sponsoring Organization.

SIGNATURE OF CAMPER OR LEGAL GUARDIAN OF CAMPER if Camper is under 18 years of age. DATE