

# Erma Camp 2019

July 19<sup>th</sup> – July 28<sup>th</sup>

| <u>Children's Program</u> | <u>Pre-Teen program</u> | <u>Teen Program</u>     |
|---------------------------|-------------------------|-------------------------|
| <b>Bible Stories</b>      | <b>Bible Lessons</b>    | <b>Room &amp; Board</b> |
| <b>Songs</b>              | <b>Scripture</b>        | <b>Bible Study</b>      |
| <b>Crafts</b>             | <b>Camp T-shirt</b>     | <b>Activities</b>       |
| <b>Camp T-shirt</b>       |                         | <b>Camp T-shirt</b>     |

## Camper Registration

**(TEEN PROGRAM REGISTRATION DUE JULY 1, 2019)**

**Spots are filled on a first come first serve basis**

### Camper Information:

I will be attending: (Check one)

- Teen Program (Ages 13 – 12<sup>th</sup> Grade **\$165.00**)  
 Pre-Teen Program (Ages 10 – 12 **\$20.00**)  
 Children's Program (Ages 4 – 9 **\$20.00**)

Teen program please circle what type swimmer your child is

**Non Swimmer      Novice Swimmer      Swimmer**

Name: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

Grade completed: \_\_\_\_\_ Age: \_\_\_\_\_ Circle one: Male / Female

Address: \_\_\_\_\_

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

Cell phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### Medical Information:

Allergies (medication, food, Etc.): \_\_\_\_\_

Any medical or physical disabilities: \_\_\_\_\_

Medications: \_\_\_\_\_

Medical Insurance: \_\_\_\_\_

Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

Please see the youth director upon arrival concerning any medications that will need to be administered during camp.

**Teen program is required to provide a statement from their physician that their immunizations are current to participate in camp.**

### Parent/Guardian Information:

Parent/Guardian name: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

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

Emergency contact: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone; \_\_\_\_\_

**Cape May Holiness Assoc.**

**470 Seashore Road.**

**Erma, NJ 08204**

**609-884-5314**

**Ermacamp.org**

**[Youth@ermacamp.org](mailto:Youth@ermacamp.org)**

# Youth Rules

(Please go over all rules with you child before signing)

- All youth campers are expected to attend all services conducted at camp.
- Campers are not permitted in any housing other than where they are being housed for the week.
- Registered campers must stay on the grounds within the boundaries established for the program.
- All youth must remain in their dorms from 11:00pm – 6:00am. Failure to comply is sufficient grounds for dismissal.
- No drugs, alcohol, any tobacco products, cigarettes, vapor products, knives or fireworks are permitted at camp. Possession of any of these items is sufficient grounds for dismissal
- Public display of affection is not to be displayed at any time
- **Always dress modest and appropriate. Swimsuits must be one piece or covered up. No spaghetti strap shirts, no belly shirts and no undergarments should show at anytime. Shorts must be modest in length.**
- No cell phones or electronic devices are allowed during services, bible study or in the dining hall.

**Camper Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I realize that my child can become injured at camp. I assume all risk of injures to my child and hereby release and discharge Erma Camp from any liability which may result in injury to my child. In consideration of the privilege of my child's participation in Erma Camp, and on behalf of my child and me as parent/guardian, I hereby release, discharge, hold harmless and indemnify and covenant not to sue Erma Camp and all youth ministries staff. I am the legally responsible parent or guardian of my child. I agree that insurance protection is my responsibility. I give permission for the camp to administer medications as it seems necessary to my child, including medication sent with my child or non-prescription medications available at the camp. In event of an emergency, I understand that every effort will be made to contact me. In the event that I can not be reached I give my permission to the physician selected by the camp administration to hospitalize and secure professional treatment (including surgery) for my child. I give permission for free use of my child's name and picture in camp pictures, video's and any publications revolving around Erma Camp. I assume all financial responsibility for my child's actions which may include but not limited to damage to property or personal possessions to others. If staff deems it necessary for my child to be removed from camp for any reason, I will respond promptly by picking up my child. I realize that Erma Camp cannot be responsible for my child's possessions, and therefore I will not send him/her with any valuables.

**I agree to the above terms. I understand that my child must obey all the camp rules, and his/her failure to do so may result in early expulsion from camp at my expense.**

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

For registration, please mail or e-mail this form to:

Bryan Warman  
2302 Inwood Rd.  
Wilmington, DE 19810  
or  
Youth@ermacamp.org

Payment can be made prior or upon arrival at camp.

What to Bring:

- Bible
- Sleeping bag or Blanket & pillow
- Twin sheets
- Modest clothing
- 1-piece bathing suit & towel
- Toiletries
- Spending money