**Girls Mission Camp**

**CAMPER INFORMATION**

(Sponsors Do Not Have to Fill Out This Form)

Please complete this information sheet and bring it with you to registration.

Camper and parent/guardian signature is necessary.

Camper’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_

Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_ School Grade Completed \_\_\_\_\_\_\_\_\_

Mother’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Church Camper Attends \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Church Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cabin\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_

Has camper made a profession of faith? \_\_\_\_\_\_\_ Yes \_\_\_\_\_\_ No

Is camper a church member? \_\_\_\_\_\_\_ Yes \_\_\_\_\_\_ No

Are camper’s parents Christians? \_\_\_\_\_\_ Mother \_\_\_\_\_\_Father

**Water Activities Information**

This **must be** completed. Campers swim only at scheduled times when lifeguards are present.

Are there any water activity restrictions?\_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_ No

If yes, please inform your church sponsor and explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Camper Participation:**

As a camper/participant, I will participate in all activities to the best of my abilities and with respect to fellow campers, staff, and faculty.

Camper/Participant Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The above information is both correct and current and named camper has permission to participate in camp activities including swimming and peddle boating, unless noted.**

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



Adventure Recreation Assumption of Risk

(Only 5-6 graders who want to participate MUST fill this out)

Participant’s Name (please print):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Tall Timbers Baptist Conference Center Adventure Recreation Course was

constructed by a professional Adventure Recreation builder according to nationally

recognized industry standards, is by that builder, and is run by

course-specific trained instructors. Participation will never be forced on any individual

going through the course.

I am aware that during my participation at the Tall Timbers Adventure Recreation

Course, certain risks and dangers do exist. These include, but are not limited to the

following: hazards of being in a wilderness setting, forces of nature, and those existing

because of the nature of the program. With this knowledge, I have and do hereby

assume all risks associated with participation in the Adventure Recreation Course and

will hold harmless the staff and officers of Tall Timbers Baptist Conference Center and

the Louisiana Baptist Convention, from any and all liability, actions, cause of action,

debts, claims and demands of every kind and nature whatsoever, which I now have or

which may arise from, or in connection with my participation in any activities arranged

for me by Tall Timbers and its staff. The terms hereof shall serve as a release and

assumption of risk for my heirs, executors, and administrators and for all members of

my family.

In the event of an accident or illness, Tall Timbers will make every effort to provide first

aid and, if needed, arrange transportation to medical facilities.

Signature of participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date signed: \_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian if participant is under 18 years of age:

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

Home phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and phone of emergency contact in case above numbers cannot be reached:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_

**LOUISIANA BAPTISTS**

**Permission to use and record picture and/or voice on**

**photographs, films, audio, and/or videotapes and internet**

**websites.**

**I authorize the Louisiana Baptist Convention and the**

**Executive Board of the Louisiana Baptist Convention**

**(including any of their departments or related agencies) to**

**use photographs, films, and/or voice recordings whether by**

**audio, videotape or other images of my child (participant) for**

**the purpose of and use in Louisiana Baptist Convention, Inc.**

**/Executive Board of the Louisiana Baptist Convention, Inc.**

**promotional material, website, video, podcasts, and**

**publications. I understand that I will not receive any**

**payment or other remuneration for this authorization.**

**Must be signed by each parent/guardian for the child to**

**participate in the event.**

**Yes\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent/Guardian Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Church \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TALL TIMBERS Parental Permission to Participate and HEALTH FORM**

*This form must be signed by each parent/guardian for camper to participate in event. Please*

*do not mail this form. Bring with you at registration.*

**Camper’s Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/State/Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_ Grade Completed This Year\_\_\_\_\_\_\_\_\_\_

**Name of Parent or Legal Guardian**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/State/Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: Home (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_Work (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of camper’s physician** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone (\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Health Insurance\_\_\_\_\_\_\_\_\_\_\_\_\_

ID Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please list two people who may be contacted in case parent/guardian cannot be**

**reached in an emergency:**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (\_\_\_\_\_\_) \_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone (\_\_\_\_\_\_)\_\_\_\_\_\_\_

**General Health and Medical History**

1. List any chronic or long-term illness: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Serious injuries or surgeries: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Known allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain reaction and indicate medication used or other action to be taken:

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

Explain any physical/medical conditions that we should be aware of:

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

**Medication**: Is camper bringing medication to camp? Yes\_\_\_\_\_\_ No\_\_\_\_\_\_\_ If yes, please

list all medications on back of this form. ***Medication must be in pharmacy container***

***with patient’s name and the dosage instructions on it.*** If dosage instructions are

different, please note, and sign your name. Over the counter medicine must be in the original

package.

**Restrictions:** Does camper have any activity restrictions? Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_

If yes, please specify:

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

**Parent/Guardian Signature:**

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

**Camper Packing List**

Sleeping bag or two single sheets, pillow, one blanket, towels and washcloths

Soap, shampoo, toothbrush, toothpaste, deodorant, mirror, comb, brush,

sunscreen, insect repellant, and water bottle, shower shoes

Clothes: jeans, shorts, T-shirts, tennis shoes and one other pair of closed-toe shoes

(Please, no spaghetti strap, halter, midriff-baring tops, OR short-shorts)

One-piece bathing suit, towel, and a cover-up (No tank top type of swimsuits.)

Bible and notebook

Optional spending money

First Evening Dress Up: LUAU Wear

Second Evening Dress Up: Girls Only Pajama Party Movie Night in Activities

Building with pajamas, pillow, blanket, and stuffed animals.

**IMPORTANT:** Please label all personal items. Neither WMU nor Tall Timbers

will be responsible for lost articles.

**DO NOT BRING:** Cell phone, iPod, iPad, shaving cream, or silly foam.

**FREQUENTLY ASKED QUESTIONS**

**1. When Does Camp Begin and End?**

Check-in begins for Girls Mission Camp on Sunday, July 23 from 1:00- 4:00 PM in the

Georgia Barnette Conference Center. NO camper will be allowed to register if she is not

pre-registered. Girls Mission Camp ends at 12:00 PM on Wednesday, July 26.

**2. What happens when we arrive at camp?**

Arrive between 1:00- 4:00 PM and come down to the Georgia Barnette Conference

Center. Have one sponsor find what cabin your church is in and take them to their cabin

to meet their Camp Staffer and unload their belongings. Send one sponsor to our

registration table with all forms and medication.

ALL forms must be completed and signed by a parent or guardian. **Organization of**

**Forms:** Girls Mission Camper Information Form, Adventure Risk Form, and Video

Release Form. Alphabetize packets by camper and staple. **Please do not staple packs.**

Page 1 All Campers must fill out.

Page 2 Only 5-6 graders need to fill out.

Page 3 All Campers must fill out.

Page 4 All Campers/Sponsors must fill out.

Page 7 All Sponsors must fill out.

Heath forms and camper medication must be given to nurse at check-in.

**3. Will they need money for a Mission Offering?**

We will be taking up an offering during the week. This year’s offering will be going to

Baptist Global Response (BGR). The projected money raised at camp will provide one

new house for someone who has lost everything ($500), one cow for a family in need

($300) and a supply of infant formula to save the lives of at-risk children ($20). We will

be collecting the offering on Tuesday night of camp https://gobgr.org/about/faq

**4. What are Ropes Course and Bazooka Ball like?**

Tall Timbers Adventure Recreation Course (optional for 5-6 grade) and Bazooka Ball (all

campers) is part of our recreation program. Participation is not required; it is an option.

5-6 grade campers must bring the signed form to camp. For 5-6 grade campers to

participate in the ropes course, parents must complete and sign the Adventure Risk

Form. No form is needed for Bazooka Ball.

**5. Do you accommodate physical or dietary needs?**

Yes! If your camper has a physical or dietary limitation that might affect her

participation, please call Jess Archer (1-800-622-6549 ext. 266) **2 weeks before** camp

date so that we can be prepared properly. Please do not send your child to camp if she

has been exposed to any communicable disease within two weeks of camp date. Please

check for head lice the week before camp.

**6. What about camp snacks and spending money?**

Afternoon snacks are available through The Hub and vending machines. Please send

one-dollar bills, quarters, and dimes. There is a gift shop and GA Camp store at Tall

Timbers! Campers can buy snacks, t-shirts and souvenirs. $10-20 should cover adequate

spending money.

**7. Are there Camptivities at camp?** A Camptivities form will be mailed to each

church upon completion of GM Camp registration.

**DIRECTIONS TO CAMP**

**10218 Highway 165 S, Forest Hill, LA 71430**

**From Baton Rouge:** Travel west on I-10 to I-49. Travel north on I-49.

Take exit 66. At top of ramp, turn left onto Highway 112. Travel west on

Highway 112 for 6 ½ miles. Turn right (north) onto Highway 165. Tall

Timbers is 4 miles on left.

**From Alexandria:** Travel South on Highway 165. Tall Timbers is 3 miles

south of Woodworth on the right.

Or, drive south on I-49 to the Woodworth exit (73). Turn right at end of

ramp. Travel west on Parish Road for approximately 2 miles. Turn left

(south) onto Highway 165. Tall Timbers is 3 miles on the right.

**Sponsor Information**

**Please email this form by June 30, 2017**

**Jess.Archer@LouisianaBaptists.org**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Church\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pastor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am a Christian yes \_\_\_\_\_\_\_\_\_ no \_\_\_\_\_\_\_\_

I am willing to pray in public yes \_\_\_\_\_\_\_\_\_ no \_\_\_\_\_\_\_\_\_

Briefly, relate your salvation experience

Spiritual Growth Information

Why do you want to be a Girls Mission Camp Sponsor?

Camping Experience

Talents/Skills/Abilities that may contribute to Girls Mission Camp

Are you comfortable sharing the plan of salvation with:

An individual yes \_\_\_\_\_\_\_\_\_ no\_\_\_\_\_\_\_\_\_

A small group yes \_\_\_\_\_\_\_\_\_ no\_\_\_\_\_\_\_\_\_

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**