



# Camper Application

## Youth Camp

**\*Registration Deadline and non-refundable \$85.00 Deposit due by: Friday, June 7, 2019**

Sponsored by the Daniell Baptist Association and held at Brewton-Parker College

**Monday June 17 through Friday June 21, 2019**

For all youth just completing 6<sup>th</sup> through 12<sup>th</sup> grade

**Total camp fee of \$175.00** includes 4 nights, 11 meals, t-shirt, tote bag, and other items throughout the week. Upon receipt of your application you will receive a confirmation and information sheet **via e-mail**.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ T-Shirt Size (adult sizes only): \_\_\_\_\_

Grade just completed: \_\_\_\_\_ Parent E-Mail address (to be used for confirmation letter): \_\_\_\_\_

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

(Street or P.O. Box)

(City)

(State)

(Zip)

Parent/Guardian Name(s): \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone(s): \_\_\_\_\_ Cell Phone(s): \_\_\_\_\_

Contact for Emergencies: Name: \_\_\_\_\_ Phone Numbers: \_\_\_\_\_

Please list any allergies/medications or other medical conditions that would prevent camper from participating in all activities: \_\_\_\_\_

Name of Insurance Company covering camper: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Name of Policy Holder: \_\_\_\_\_

Church Camper attends: \_\_\_\_\_ Member: Yes \_\_\_\_\_ No \_\_\_\_\_

Please list your 1st and 2nd choices for a roommate (We will do our best to give you one of these, but keep in mind that if the person you choose has listed other people, it may be difficult to accommodate everyone. Communication with your chosen roommate would help insure your choice).

(First Choice)

(Second Choice)

As a camper I agree to abide by all the rules set forth by the DBA Youth Camp Leadership Team. I further understand that failure on my part to comply with rules and directions given by the event organizers and youth leaders that are serving as counselors and chaperones of the event will merit my immediate dismissal from the DBA Youth Camp at my parent/guardian's expense.

Youth Campers Signature: \_\_\_\_\_ Date: \_\_\_\_\_

As a parent/guardian I agree to allow my child to attend the **2019 DBA Youth Camp**. I understand that the event organizers, the DBA, individual DBA churches or BPC will not be held liable for injuries incurred as a result of my child's attendance at this event. Should injury or illness arise, other than minor injury, I give my permission for medical care to be provided. I shall be fully responsible for payment of such cost. I also give my permission for any photographs taken of my child to be used for possible promotion of camp. I also give my permission for my child to be transported from Brewton-Parker while participating in local mission projects.

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

A parent/guardian signature is required.

Return application and deposit by **June 7** to:

**Daniell Baptist Association**  
P.O. Box 388  
Ailey, GA 30410

If you have questions, please contact  
The Daniell Baptist Association at 583-2713  
Or Laura Hay at 583-0160

In order to be placed in a room you **MUST** complete this **ENTIRE** application.

**\*To be eligible for door prizes your application must be in by the deadline of **June 7th**.**