

Please print on 2 pages, not front and back

Please fill out both pages of the registration for each camper.

PLEASE PRINT CLEARLY

Applicant _____ boy girl Birth Date ____/____/____

Parent/Guardian _____ Age ____ 2017-18 grade ____

Mailing Address _____ Primary Phone(____)____-____

City _____ State _____ Zip _____ Other Phone(____)____-____

E-mail _____

Acceptance notice and further camp information will be sent via e-mail if legible address is provided. Address provided is parent's camper's

Home Congregation _____ Circle Shirt Size

Cabin Mate Preference _____ YS YM YL AS AM AL AXL AXXL

Pre-assigned cabins for beginner and junior only. Other sessions picked at registration.

Shirt & preferred size not guaranteed after May 15.

Select session(s) here.

Grades are based on 2017-18 school year.

BEGINNER CAMP for Kindergarten - 9 yr old

- June 18-20 \$65
June 21-23 \$65

JUNIOR CAMP for grades 3-6

- June 24-30 \$125
July 1-7 \$125

INTERMEDIATE CAMP for grades 6-9

- July 8-14 \$125
July 15-21 \$125

SENIOR CAMP for grades 9-12

- July 22-28 \$125
July 29-August 4 \$125

GIRLS' CAMP for girls grades 7-12

- June 3-6 \$65

Payment Information

Enclosed please find:

- Entire payment for session(s) marked
\$25 registration deposit
Donation of \$ (to defray cost of camp for another camper)

Early Registration Bonus

Registrations with deposit or full payment postmarked by May 15 receive a discount: \$10 per week for full week sessions \$5 for "half" week session (Beginner, Girls')

NYC Behavior Guidelines

- 1. The use of drugs, alcohol, or tobacco will not be tolerated.
2. Recurrent misconduct, such as swearing, fighting, vulgar language, and disrespect for others will not be tolerated.
3. Physical displays of romantic affection are inappropriate.
4. Clothing rules are as follows: -Short shorts, see-through tops, and garments that expose the torso or are skin tight are not to be worn -For campers who have completed grades 6-12, shorts will have an inseam no less than 6 inches. -For campers in grade 5 and below, the inseam will be no less than 4 inches. -Skin should not be visible between shirt and pants. -Sleeveless tops must have straps at least 2 inches wide and the top must come up to the armpit under the arm. - No revealing necklines, including razorback or open back tops/shirts. -No skin tight clothing; undergarments should not be visible under, around, or through clothing.
5. Campers are expected to attend all activities.
6. Campers may not leave the campground without director's permission.
7. Campers are not permitted to drive any vehicle on the campgrounds. Personal vehicles must be parked and locked, and keys turned in at Registration.
8. Lake, river, and Turkey Creek use is by permission only and only with proper supervision.
9. All medications and supplements must be turned in at Registration (State law).
10. All accidents are to be reported to the camp health staff or the Director.
11. Camper cabin areas are off-limits to the opposite sex. Staff cabins are off-limits to campers.
12. Fireworks or any kind of fire lighting device, weapons, or knives are not allowed.
13. Electronic devices other than digital cameras are not allowed. Devices will be collected and held in the office until end of session.
14. Writing on or defacing of camp property is not allowed.
15. To minimize health hazards, wearing shoes is required for Beginner, Junior, and Intermediate sessions and strongly recommended for Senior.

Violation of these guidelines may result in notification of parents/guardians and the dismissal of the camper.

Camper signature (required) _____ date _____

Parent/Guardian signature (required) _____ date _____

Mail both pages of Registration & payment to: Nebraska Youth Camp Registrar Box 82 York, NE 68467

For additional information on what to expect see: www.nebraskayouthcamp.com/sessions.php During registration season you can contact the registrar at: campregistrar@windstream.net

CAMPER Last name

First name

Mark items that we should be aware of while we are responsible for your child at camp. Additional information can be added on the back or attached.

- Bed wetting
- Sleep walking
- Outdoor allergies
- Asthma
- Diabetes
- Heart problems (specify) _____
- Seizures
- Recent exposure to communicable disease
- Behavior concerns (specify) _____
- Special care or diet: _____
- Allergies: Type of reaction
- _____
- _____
- _____

Medications

Per State Law all medications must be turned in to the camp health staff at registration. The camp health staff must dispense all medications. All medication must be in current original container. If it is over the counter medication, it should also be marked with camper name, dosage, and frequency.

Please list your child's medications with dosage and reason for use:

Primary Emergency Contact: _____
Relationship _____ Phone(____)____-____

Alternate Emergency Contact: _____
Relationship _____ Phone(____)____-____

Health Insurance coverage for this child is provided by: _____
(company name) Please provide a copy of your card.

Authorizations

Medical

1. This health history and medication information is correct as far as I know and the person herein described has permission to engage in all prescribed camp activities, except as noted on back or attached.
2. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Camp Director to hospitalize, secure proper treatment, and order injections, anesthesia or surgery for my child as named herein.
3. I agree the camp is released from any liability in connection with the above named child except as covered by the camper insurance carried by the camp (camp coverage is secondary).

Leaving Camp Grounds

The benefits of the camp program are hampered by interruptions with outside activities. For this reason we encourage as few departures from the camp ground as possible. *If it will be necessary for your child to leave camp during his/her session, please speak with the directors or health staffer at registration about scheduling.*

At two week sessions time is build into the Saturday schedule for campers to make a town trip for laundry. Occasionally Senior Session has a camp sponsored activity that takes place in Kearney.

In the course of the camper's stay: (please check all that apply)

1. My child will depart the camp for the following reason: _____
2. My child has permission to go to town for laundry camp activity
3. My child has permission to go to town with Adult staff (over 21) Family Member (list below) Other (list below)

Name/relationship Name/relationship Name/relationship

Departure at the end of camp:

I plan for my child to depart with _____ (Please notify the camp if plans change.)
Name/relationship

Media usage release (please check one)

Nebraska Youth Camp updates a photo journal of camp activities during sessions on the web site. These pictures are also used in promotional materials and memorabilia in digital and printed format. Such items may include other locations on the camp website, quarterly newsletter, slide shows, etc.

- I withhold permission for my child's image to be displayed in this manner.
- I give permission for my child's image to be displayed in this manner.

Parent/Guardian Printed Name

Signature

Date