



# Camp Registration Form

## Morganwood FWB Youth Camp

Please complete a separate registration form for each camper. To qualify for pre-registration benefits, complete and return forms to: Morganwood Application, 146 Free Will Lane, Saltillo, MS 38866 by the pre-registration deadline (see [www.morganwoodcamp.org](http://www.morganwoodcamp.org) for details).

### Camper Information

Camper Name: \_\_\_\_\_

Gender:  Male  Female D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade Completed: \_\_\_\_

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

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

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

Church Affiliation: \_\_\_\_\_

Pastor: \_\_\_\_\_ Youth Pastor: \_\_\_\_\_

T-Shirt Size (Circle One): YS YM S M L XL 2XL 3XL

### Medical Information

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance: \_\_\_\_\_ Policy # \_\_\_\_\_

*Note: If possible please include a photocopy of campers insurance card.*

Allergies/Health Considerations: \_\_\_\_\_

*Note: Every camper shall receive a documented health screening not later than 48 hours after arrival at camp as prescribed by the Mississippi State Department of Health.*

List any medications that will be sent with the camper: \_\_\_\_\_

*Note: All medications are to be in their original pharmacy containers bearing the prescription number, date filled, physician's name, directions for use, and the patient's name. All medications will be collected at registration and locked-up in the First Aid office. A form indicating the dispensing of the medication is to be kept and the form signed by parent or guardian when the medication is given back to them.*

### Emergency Contact Information

Name of Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Names of people other than parent/guardian or pastor who are authorized to visit or pick up your child from camp:

Names of other siblings attending during the camper's same week of camp:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

[www.morganwoodcamp.org](http://www.morganwoodcamp.org)

#### Physical Address

255 County Road 1029  
Tupelo, MS 38804

#### Camp Administrator:

Rev. Dennis Kizzire  
146 Free Will Lane  
Saltillo, MS 38866

[morganwoodcamp@gmail.com](mailto:morganwoodcamp@gmail.com)

(662) 213-0231

#### Camp Phone

(Emergencies Only Please)  
(662) 213-0231

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Get \$5 Snack Shop  
Credit**



**SCAN ME**

### TO BE COMPLETED BY CAMP STAFF:

Camp Year: 20\_\_\_\_

Fee Amount Received:  
\$ \_\_\_\_\_

Canteen Received:  
\$ \_\_\_\_\_

#### Payment Method

Cash  Credit

Paypal  Check

Check #: \_\_\_\_\_

Payment Received By: \_\_\_\_\_

#### Medication Received

By: \_\_\_\_\_

Bunk #: \_\_\_\_\_

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# Camp Registration Form

## Morganwood FWB Youth Camp

### Notes to Parents and Campers:

1. **What to Bring to Camp:** Bible, notebook, pen or pencil, blanket & sheets (or sleeping bag), pillow, towel(s), washcloth(s), soap, toothbrush, shampoo, clothes for worship and recreation, modest swimwear (preferably one piece), money for snacks & souvenirs, and a desire for Christian growth. *Please label personal items and clothing for campers attending the Trailblazer or Adventurer camps.*
2. **Dress Code:**
  - A. **For services** girls shall wear knee length, modest dresses or skirts, blouse or t-shirt (no undergarments showing). Boys shall wear long pants (pulled up at the waist) and modest shirts or t-shirts.
  - B. **For recreation** girls and boys shall wear loose fitting apparel at least knee length. **NO SHORT SHORTS.**
  - C. At the water slide, and other coed water activities, boys will wear shirts and girls will wear shirts and shorts over their bathing suit.
  - D. Boys and girls will be covered coming **to and from** the pool. *[Boys will wear shirts and girls will wear shirts and shorts or conservative robe over their bathing suit].*
  - E. It is required that a separate swim outfit be packed for the water-slide than what is packed for the pool.
3. If a teen camper drives to camp, they will be asked to surrender their keys until the end of the camp week.
4. Cell phones and other electronic devices are to be collected from campers and C.I.T.s during registration or as they are found in campers' possession. These devices will be locked-up in the First Aid Office until checkout.
5. Shaving cream, water guns, etc. will be collected as they are found in campers' possession. They may be returned at times for designated uses.
6. Canteen money will be collected at check-in and Canteen Credit Card(s) will be issue. The canteen will not accept cash.
7. Bunk Numbers shall be recorded on the camper's application and filed for quick access by the Camp Director and First Aid Supervisor.
8. No camper is to leave camp with ANYONE without being signed out on the proper form(s). They are to be signed back in. Only those designated on the camper's application are to take the camper off campus.
9. All campers are to be signed out at the end of camp. Collected medications, remaining canteen money, confiscated items (such as cell phones and other electronic devices), and group pictures will be returned at this time.
10. Rules for conduct can be found at [www.morganwoodcamp.org](http://www.morganwoodcamp.org) (click on [Camp Rules](#)).

### To be read and signed by the camper:

*As I come to this Christian youth camp, I am willing to cooperate in the planned activities of the camp. I will be respectful to the staff. I agree abide by all [camp rules](#) and the dress code. It understand that if I become a discipline problem beyond the staff's ability or desire to handle, my parent/guardian(s) or pastor will be called to pick me up.*

Date: \_\_\_\_\_ Signature \_\_\_\_\_

### To be read and signed by the parent/guardian:

*I give my consent to a preliminary health assessment as required by the Mississippi State Department of Health. I also understand that in the event medical treatment is required for my child, every effort will be made to contact me. However, if I cannot be reached, I grant permission to Morganwood staff to secure the services of a licensed physician of their choice to provide care necessary for my child's well-being. I authorize all emergency medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment in the event that I cannot be reached. I also give permission for my child to be transported off camp grounds for camp sponsored off-site activities. I also give permission for my child's pictures or images to be included in publicity, publications, video promotions and the Morganwood website(s).*

Date: \_\_\_\_\_ Signature \_\_\_\_\_

### Camp Fees

**(Before May 1<sup>st</sup>):**

**Crusader (7<sup>th</sup>-12<sup>th</sup>): \$120**

**Horizon (4<sup>th</sup>-6<sup>th</sup>): \$120**

**Trailblazer (1<sup>st</sup>-3<sup>rd</sup>): \$105**

**Adventurer (Pre-K): \$35**

**(After May 1<sup>st</sup>):**

**Crusader (10<sup>th</sup>-12<sup>th</sup>): \$150**

**Horizon (4<sup>th</sup>-6<sup>th</sup>): \$150**

**Trailblazer (1<sup>st</sup>-3<sup>rd</sup>): \$135**

**Adventurer (Pre-K): \$60**

*\$5.00 discount for the second child and \$10.00 discount for each additional child from the same household*

*A canteen is available for campers, allowing them the opportunity to purchase drinks, snacks, & souvenir items. A canteen card is issued at check-in. Any money left on the card at the end of camp will be refunded at check-out.*

### Concerning Sunscreen:

\_\_\_\_\_ My child **will be responsible** for keeping up with and applying their own sunscreen.

\_\_\_\_\_ My child **requires First Aid Staff Assistance** for applying sunscreen. (The child's sunscreen will be treated as a medication and will be supervised as they apply it per written parental instruction on a medication dispensing form.)

**Parent/Guardian Initials:**

\_\_\_\_\_