

# transformed

November 18, 2009

Dear Pastor and Children's Leader:

It is time to prepare for TRANSFORMED Kids Camp 2010! Every child should have the opportunity to attend summer camp. Therefore, in order to make a camp more accessible for more children and churches we have added two camps, for a total of five summer camps.

Times are tough and finances are tight, but children still need the life changing experience they receive only at a camp. This packet of camp information is going out two months earlier than normal to provide dates for your church calendar. You have plenty of options to choose a camp best suited to your schedule. And to provide enough time for the children to raise the money needed.

The camp program will include activities, group and individual; Bible Studies; crafts; games; specialized workshop choices; chapel services, meeting friends, and growing in God. People are already praying for the ministry of Kids Camp and for all that attend. God has touched so many lives at camp in the past and our prayer is that He will do that again. This generation of children face pressures and stressors so much sooner than previous generations, camp is the ideal setting for God to move on their hearts.

We will feature the above items at each of the following Kids Camps, with a location near you! The costs vary from \$110 to \$230, so you can pick a camp that fits your financial preferences.

- Camp # 1 - Jenness Christian Camp, Cold Springs, California  
Dates: June 28- July 1 Registration: \$230.00
- Camp # 2 - Sugar Pine Christian Camp, Oakhurst, California  
Dates: July 5- 8 Registration: \$200.00
- Camp # 3 - Redwood Campground, Garberville, California  
Dates: July 12-16 Registration: \$110.00
- Camp # 4 - Mt. Lassen Christian Campground, Mineral, California  
Dates: July 19-23 Registration: \$125.00
- Camp # 5 - YMCA Camp Loma Mar, Loma Mar, California  
Dates: August 9-12 Registration: \$200.00

This packet includes all the information and registration materials needed for camp,, as well as, items designed to assist you in promoting Kids Camp in your church including: two color posters. Regularly updated information can also be found at [www.ncnkids.com](http://www.ncnkids.com). You will find a link to view the Kids Camp 2010 Promotional Video on youtube.com. To request your own copy of the promotional video on DVD please contact the Children's Ministry office at [kids@agncn.org](mailto:kids@agncn.org) or 916-503-2891.

An ongoing issue that churches face when wanting to send their children to camp is counselors. Currently, a solution to this problem is in the works. Please do not hesitate to send your children if you do not have a counselor immediately available. Contact us regarding your need and we will try our best to assist you. If your church has more counselors available than what is needed for your size group, please contact us so we can make spaces available for churches without counselors.

A BGMC offering will be taken at each camp. We do want to inform our children of missions and the part they play in preaching the Gospel around the world. Ideas for preparing your children for this important offering are included on the "Additional Information Page." **The Children's Ministry office is available to coach your camp leader through the process and help make this the best summer camp your kids have ever attended!**

Together we can make TRANSFORMED Kids Camp 2010 an experience that will impact lives for years to come!

Serving God's Kids,



Nikki Rogers  
Children's Ministries Director



# GROUP PLANNING HELPS

*Here are some steps that will help you in planning your group's Kids Camp experience.*

1. Choose which camp you will attend.
2. Start Advertising camp to your kids and congregation. Kids Camp promo DVD's are available by request, please contact the CM office at [kids@agncn.org](mailto:kids@agncn.org) or 916-503-2891. This DVD was designed with brief promo clips that will easily fit into any church service schedule.
3. Don't forget the deadline! Be sure to take note of the deadline for your camp. Remember that camp fills up on a first come first served basis, so meeting the deadline is extremely important.
4. Plan fundraisers and special offerings. If you plan to do fundraisers in order to help kids pay for camp, it is important to plan those right away. Some churches take special offerings to help with camp scholarships or to send counselors. If you plan to do so, keep the camp deadline in mind and plan the offering well in advance in order to help you meet the deadline.
5. Prepare counselors paperwork. Make sure all adults attending camp have been screened through your church, which **MUST INCLUDE** a background check or fingerprinting. (Detailed instructions can be found in this packet.) Do this early in case of difficulties.
6. Collect permission slips and payment. The deadline you give your kids and parents does not need to be the same deadline given by our office. Allow yourself some "cushion" in order to collect all monies in time to make the deadline.
7. Turn in the forms! In order for your registration to be considered complete the following forms **MUST** be turned in with the payment and **POSTMARKED** by the registration deadline date:
  - **Group Reservation Form**
  - **Staff Information Form**
  - **Rooming Requests Form.**
8. Organize Transportation.
9. Pray for God to move in lives and for the lives attending.
10. Ask Questions! If you are in need of any assistance during the registration process, please do not hesitate to contact the CM Office or your camp director. Camp Director information is available at [www.ncnkids.com](http://www.ncnkids.com)

**PLEASE NOTE:** Each child must have a permission slip on file with the camp director at camp. These forms may be turned in prior to camp (with your group registration) or on the day of camp. If permission slips are not submitted prior to camp they **MUST** be submitted the day of camp. **Any child without a completed permission slip will not be permitted to stay at camp.**



# GROUP LEADER ADDITIONAL INFORMATION

## COUNSELORS MUST BE PROVIDED BY EACH CHURCH

Each church needs to follow the ratios of each camp by providing qualified adult counselors. For example, if the ratio for the camp you choose to attend is 1 to 5, this means for every 5 boys your church needs to send 1 adult counselor. If 6 boys attend, your church will need to send 2 adult male counselors. If your church sends 6 boys and 1 girl, your church will need to send 2 male counselors and 1 female counselor.

### **This requirement will ensure that the children from your church are:**

- Safe: group activities are designed with the ratios in mind & each cabin is designed for only a certain number of bodies.
- Spiritual Development: When children are asked to come to the altar to pray, only counselors from your church will be instructed to pray with the children from your church.
- Follow up for the children: Once camp is over, the adult counselors will be the ones to follow up and testify about the spiritual growth and experiences from Kids Camp with the congregation at your church.

*\* An ongoing issue that churches face when wanting to send their children to camp is counselors. Currently, a solution to this problem is in the works. Please do not hesitate to send your children if you do not have a counselor immediately available. Contact us regarding your need and we will try our best to assist you. If your church has more counselors available than what is needed for your size group, contact us so we can make spaces available for churches without counselors.*

## BGMC OFFERING

Each year at camp, one service is focused on the Great Commission, to reach all people with the Gospel, with an opportunity for the children to give to missions through BGMC. Some ideas for your church to effectively prepare for this offering include: Advertise to parents and set a recommended amount for children to bring, then set it aside prior to leaving for camp. Inform children when leaving from your church about the offering and ask them to set it aside prior to arriving at camp.

***If you wish to have BGMC giving credit please bring your offering clearly labeled in a separate envelope.***

## MERCHANDISE

At camp, your children will be able to deposit their monies into the camp bank for safe keeping and will be able to access their bank to use during snack time. In addition to nachos, candy, drinks and various other snacks they will also be able to purchase:

Water bottles with the camp logo for \$3  
Camp Memories DVDs for \$5  
Camp Button for \$2

***We recommend that campers bring \$25 to spend at the camp snack bar.***

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# VOLUNTEER SCREENING

**Group Leaders:** Please make sure that your adult sponsors have all been properly screened and fingerprinted in accordance with the policies set forth by the Northern California and Nevada Assemblies of God District Council, Inc. For assistance or more details please call the NCN Children's Ministries office at (916)503-2891.

## IMPORTANT POLICY CHANGES, PLEASE READ

There are two forms required by the Northern California and Nevada Assemblies of God District Council Executive Presbytery to be completed by every volunteer who is involved in any District Sponsored Activity:

1. The **VOLUNTEER APPLICATION** is to be completed by all applicants for any position (volunteer or compensated) involving the supervision of custody of minors. It is required **ONE WEEK prior to the event and will be kept completely confidential** at the District Resource Center. **This form only needs to be completed one time by each volunteer for that church.**

2. The **BACKGROUND SCREENING AFFIDAVIT** is to be completed and then signed by the Senior Pastor in the presence of a Notary Public and returned to the Northern California and Nevada District of the Assemblies of God District Resource Center **ONE WEEK prior to the event and is required for each event.** This form is to indicate the date on the background screening, as well as the date they were cleared for service within the local church.

**BOTH FORMS AND INSTRUCTIONS CAN BE DOWNLOADED AT WWW.NCNKIDS.COM.** Forms are located with the TRANSFORMED: Kids Camp 2010 information. All forms must be turned in **ONE WEEK PRIOR TO THE START OF YOUR CAMP.**

\*\* Be advised that there may be some policy changes that go into effect after January 1st. These changes will make it easier for your church to complete all Volunteer Screening Requirements. Please visit [www.ncnkids.com](http://www.ncnkids.com) after January 1st for updated information. \*\*

If you have any questions please call us at 916.503.2891.

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# SUMMER CAMP 2010 GROUP RESERVATION FORM

**CAMP # 1: JENNESS PARK CHRISTIAN CAMP, GOLD SPRINGS  
JUNE 28— JULY 1, 2010**

## CHURCH INFORMATION

Church \_\_\_\_\_  
Address \_\_\_\_\_  
City, ST, & Zip \_\_\_\_\_  
Ph# \_\_\_\_\_ Fax# \_\_\_\_\_  
Senior Pastor \_\_\_\_\_  
Group Leader Name \_\_\_\_\_  
Cell # \_\_\_\_\_ E-mail \_\_\_\_\_

## CAMPER AND STAFF FEES

### Campers

\_\_\_\_\_ # of Campers x \$230.00 = \$ \_\_\_\_\_  
(Registration due by June 1)  
\_\_\_\_\_ # of Campers x \$255.00 = \$ \_\_\_\_\_  
(Registration due after June 1)

Total (Campers and Staff) = \$ \_\_\_\_\_  
Total Due = \$ \_\_\_\_\_  
Amount Paid = \$ \_\_\_\_\_

Counselor- An approved 18+ year old  
CIT (counselor in training) – An approved 14-17 year old  
**\* One counselor is required for every 7 campers.**  
Please contact the CM office at 916.503.2891 if you are need  
of a counselor for your church. We will work to the best of our  
ability to provide one for you.

### Staff

\_\_\_\_\_ # of Staff x \$230.00=\$ \_\_\_\_\_  
(Registration due by June 1)  
\_\_\_\_\_ # of Staff x \$255.00 = \$ \_\_\_\_\_  
(Registration due after June 1)

### CM Office Use Only

Total Staff \_\_\_\_\_  
Total Campers \_\_\_\_\_  
Total Attendees \_\_\_\_\_  
Total Amount \$ \_\_\_\_\_  
Amount Paid \$ \_\_\_\_\_  
Amount Due \$ \_\_\_\_\_  
Check # \_\_\_\_\_  
Date Received \_\_\_\_\_

## FINANCIAL POLICIES

1. Counselors MUST BE PROVIDED by your church to ensure the safety and spiritual development of each child.
2. Please make all checks payable to the Northern California and Nevada District Resource Center.
3. All camp reservations will be taken on a first come first served basis, complete on full payment.
4. There will be no refunds after June 2, 2009.
5. All camp balances must be paid by June 2, 2009.
7. Please mail this form with the staff information form and rooming request form to:

**Northern California/Nevada District Council**

**Attn: Children's Ministries  
6051 South Watt Avenue  
Sacramento, CA 95829**



# SUMMER CAMP 2010 GROUP RESERVATION FORM

**CAMP # 2: SUGAR PINE CHRISTIAN CAMP, OAKHURST  
JULY 5-8, 2010**

## CHURCH INFORMATION

Church \_\_\_\_\_  
Address \_\_\_\_\_  
City, ST, & Zip \_\_\_\_\_  
Ph# \_\_\_\_\_ Fax# \_\_\_\_\_  
Senior Pastor \_\_\_\_\_  
Group Leader Name \_\_\_\_\_  
Cell # \_\_\_\_\_ E-mail \_\_\_\_\_

## CAMPER AND STAFF FEES

### Campers

\_\_\_\_\_ # of Campers x \$200.00 = \$ \_\_\_\_\_  
(Registration due by June 8)  
\_\_\_\_\_ # of Campers x \$225.00 = \$ \_\_\_\_\_  
(Registration due after June 8)

Total (Campers and Staff) = \$ \_\_\_\_\_  
Total Due = \$ \_\_\_\_\_  
Amount Paid = \$ \_\_\_\_\_

Counselor- An approved 18+ year old  
CIT (counselor in training) – An approved 14-17 year old  
**\* One counselor is required for every 7 campers.**  
Please contact the CM office at 916.503.2891 if you are need  
of a counselor for your church. We will work to the best of our  
ability to provide one for you.

### Staff

\_\_\_\_\_ # of Staff x \$200.00=\$ \_\_\_\_\_  
(Registration due by June 8)  
\_\_\_\_\_ # of Staff x \$225.00 = \$ \_\_\_\_\_  
(Registration due after June 8)

### CM Office Use Only

Total Staff \_\_\_\_\_  
Total Campers \_\_\_\_\_  
Total Attendees \_\_\_\_\_  
Total Amount \$ \_\_\_\_\_  
Amount Paid \$ \_\_\_\_\_  
Amount Due \$ \_\_\_\_\_  
Check # \_\_\_\_\_  
Date Received \_\_\_\_\_

## FINANCIAL POLICIES

1. Counselors MUST BE PROVIDED by your church to ensure the safety and spiritual development of each child.
2. Please make all checks payable to the Northern California and Nevada District Resource Center.
3. All camp reservations will be taken on a first come first served basis, complete on full payment.
4. There will be no refunds after June 2, 2009.
5. All camp balances must be paid by June 2, 2009.
7. Please mail this form with the staff information form and rooming request form to:

**Northern California/Nevada District Council**

**Attn: Children's Ministries  
6051 South Watt Avenue  
Sacramento, CA 95829**



# SUMMER CAMP 2010 GROUP RESERVATION FORM

**CAMP # 3: RICHARDSON GROVE CAMPGROUND, GARBERVILLE  
JULY 12-16, 2010**

## CHURCH INFORMATION

Church \_\_\_\_\_  
Address \_\_\_\_\_  
City, ST, & Zip \_\_\_\_\_  
Ph# \_\_\_\_\_ Fax# \_\_\_\_\_  
Senior Pastor \_\_\_\_\_  
Group Leader Name \_\_\_\_\_  
Cell # \_\_\_\_\_ E-mail \_\_\_\_\_

## CAMPER AND STAFF FEES

### Campers

\_\_\_\_\_ # of Campers x \$110.00 = \$ \_\_\_\_\_  
*(Registration due by June 15)*  
\_\_\_\_\_ # of Campers x \$135.00 = \$ \_\_\_\_\_  
*(Registration due after June 15)*

Total (Campers and Staff) = \$ \_\_\_\_\_  
Total Due = \$ \_\_\_\_\_  
Amount Paid = \$ \_\_\_\_\_

Counselor- An approved 18+ year old  
CIT (counselor in training) – An approved 14-17 year old  
**\* One counselor is required for every 7 campers.**  
*Please contact the CM office at 916.503.2891 if you are need  
of a counselor for your church. We will work to the best of our  
ability to provide one for you.*

### Staff

\_\_\_\_\_ # of Staff x \$110.00 = \$ \_\_\_\_\_  
*(Registration due by June 15)*  
\_\_\_\_\_ # of Staff x \$135.00 = \$ \_\_\_\_\_  
*(Registration due after June 15)*

### CM Office Use Only

Total Staff \_\_\_\_\_  
Total Campers \_\_\_\_\_  
Total Attendees \_\_\_\_\_  
Total Amount \$ \_\_\_\_\_  
Amount Paid \$ \_\_\_\_\_  
Amount Due \$ \_\_\_\_\_  
Check # \_\_\_\_\_  
Date Received \_\_\_\_\_

## FINANCIAL POLICIES

1. Counselors MUST BE PROVIDED by your church to ensure the safety and spiritual development of each child.
2. Please make all checks payable to the Northern California and Nevada District Resource Center.
3. All camp reservations will be taken on a first come first served basis, complete on full payment.
4. There will be no refunds after June 2, 2009.
5. All camp balances must be paid by June 2, 2009.
7. Please mail this form with the staff information form and rooming request form to:

**Northern California/Nevada District Council**  
**Attn: Children's Ministries**  
**6051 South Watt Avenue**  
**Sacramento, CA 95829**



# SUMMER CAMP 2010 GROUP RESERVATION FORM

**CAMP # 4: MT. LASSEN CAMPGROUND, MINERAL  
JULY 19-23, 2010**

## CHURCH INFORMATION

Church \_\_\_\_\_  
Address \_\_\_\_\_  
City, ST, & Zip \_\_\_\_\_  
Ph# \_\_\_\_\_ Fax# \_\_\_\_\_  
Senior Pastor \_\_\_\_\_  
Group Leader Name \_\_\_\_\_  
Cell # \_\_\_\_\_ E-mail \_\_\_\_\_

## CAMPER AND STAFF FEES

### Campers

\_\_\_\_\_ # of Campers x \$125.00 = \$ \_\_\_\_\_  
*(Registration due by June 22)*  
\_\_\_\_\_ # of Campers x \$150.00 = \$ \_\_\_\_\_  
*(Registration due after June 22)*

Total (Campers and Staff) = \$ \_\_\_\_\_  
Total Due = \$ \_\_\_\_\_  
Amount Paid = \$ \_\_\_\_\_

Counselor- An approved 18+ year old  
CIT (counselor in training) – An approved 14-17 year old  
**\* One counselor is required for every 5 campers.**  
*Please contact the CM office at 916.503.2891 if you are need  
of a counselor for your church. We will work to the best of our  
ability to provide one for you.*

### Staff

\_\_\_\_\_ # of Staff x \$125.00 = \$ \_\_\_\_\_  
*((Registration due by June 22))*  
\_\_\_\_\_ # of Staff x \$150.00 = \$ \_\_\_\_\_  
*((Registration due after June 22))*

### CM Office Use Only

Total Staff \_\_\_\_\_  
Total Campers \_\_\_\_\_  
Total Attendees \_\_\_\_\_  
Total Amount \$ \_\_\_\_\_  
Amount Paid \$ \_\_\_\_\_  
Amount Due \$ \_\_\_\_\_  
Check # \_\_\_\_\_  
Date Received \_\_\_\_\_

## FINANCIAL POLICIES

1. Counselors MUST BE PROVIDED by your church to ensure the safety and spiritual development of each child.
2. Please make all checks payable to the Northern California and Nevada District Resource Center.
3. All camp reservations will be taken on a first come first served basis, complete on full payment.
4. There will be no refunds after June 2, 2009.
5. All camp balances must be paid by June 2, 2009.
7. Please mail this form with the staff information form and rooming request form to:

**Northern California/Nevada District Council**  
Attn: Children's Ministries  
6051 South Watt Avenue  
Sacramento, CA 95829



# SUMMER CAMP 2010 GROUP RESERVATION FORM

**CAMP # 5: YMCA CAMP LOMA MAR, LOMA MAR  
AUGUST 9-12, 2010**

## CHURCH INFORMATION

Church \_\_\_\_\_  
Address \_\_\_\_\_  
City, ST, & Zip \_\_\_\_\_  
Ph# \_\_\_\_\_ Fax# \_\_\_\_\_  
Senior Pastor \_\_\_\_\_  
Group Leader Name \_\_\_\_\_  
Cell # \_\_\_\_\_ E-mail \_\_\_\_\_

## CAMPER AND STAFF FEES

### Campers

\_\_\_\_\_ # of Campers x \$200.00 = \$ \_\_\_\_\_  
(Registration due by July 13)  
\_\_\_\_\_ # of Campers x \$225.00 = \$ \_\_\_\_\_  
(Registration due after July 13)

Total (Campers and Staff) = \$ \_\_\_\_\_  
Total Due = \$ \_\_\_\_\_  
Amount Paid = \$ \_\_\_\_\_

Counselor- An approved 18+ year old  
CIT (counselor in training) – An approved 14-17 year old  
**\* One counselor is required for every 5 campers.**  
Please contact the CM office at 916.503.2891 if you are need  
of a counselor for your church. We will work to the best of our  
ability to provide one for you.

### Staff

\_\_\_\_\_ # of Staff x \$200.00=\$ \_\_\_\_\_  
(Registration due by July 13)  
\_\_\_\_\_ # of Staff x \$225.00 = \$ \_\_\_\_\_  
(Registration due after July 13)

### CM Office Use Only

Total Staff \_\_\_\_\_  
Total Campers \_\_\_\_\_  
Total Attendees \_\_\_\_\_  
Total Amount \$ \_\_\_\_\_  
Amount Paid \$ \_\_\_\_\_  
Amount Due \$ \_\_\_\_\_  
Check # \_\_\_\_\_  
Date Received \_\_\_\_\_

## FINANCIAL POLICIES

1. Counselors MUST BE PROVIDED by your church to ensure the safety and spiritual development of each child.
2. Please make all checks payable to the Northern California and Nevada District Resource Center.
3. All camp reservations will be taken on a first come first served basis, complete on full payment.
4. There will be no refunds after June 2, 2009.
5. All camp balances must be paid by June 2, 2009.
7. Please mail this form with the staff information form and rooming request form to:

**Northern California/Nevada District Council**  
Attn: Children's Ministries  
6051 South Watt Avenue  
Sacramento, CA 95829



# STAFF INFORMATION FORM

## ADULT STAFF INFORMATION

Staff Name	Age	M/ F	Shirt Size
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

***I understand that all adult staff attending Kids Camp must undergo a screening process, and by signing below I hereby confirm that all of the above staff members have been listed on the Finger Printing & Background Check Affidavit form included in this packet. I also understand that any adult staff member not listed on that form will not be permitted to be a camp counselor. Any violation of this guideline will result in the immediate dismissal of the non-approved adult and possibly me.***

\_\_\_\_\_ **Group Leader's Signature**

\_\_\_\_\_ **Date**

## YOUTH STAFF INFORMATION

Staff Name	Age	M/ F	Shirt Size
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Please make as many copies of this form as necessary. Please complete all information listed above including all t-shirt sizes.



# ROOMING REQUESTS

Please make as many copies of this form as you need. Every child that is coming to camp with your group needs to be placed on this list. We make every effort to accommodate your rooming requests, but requests are not guaranteed.

Church Name & City \_\_\_\_\_

## CAMP RATIOS

- Camp # 1- 1/7
- Camp # 2 -1/7
- Camp # 3 -1/7
- Camp # 4 -1/5
- Camp # 5 -1/5

### BOYS CABIN

CABIN STAFF	
CIT (YOUTH STAFF)	

### CAMPERS

Camper's Name	Permission Slip Enclosed (Circle One)	*T-Shirt Size S / M / L/ XL	Age
	Y / N		
	Y / N		
	Y / N		
	Y / N		
	Y / N		
	Y / N		
	Y / N		
	Y / N		

### GIRL'S CABIN

*If you have a CIT in this room, please assign only 5 children for 1/7 ratio and 3 children for a 1/5 ratio.  
\* T-shirt sizes are adult sizes.*

CABIN STAFF	
CIT (YOUTH STAFF)	

### CAMPERS

Camper's Name	Permission Slip Enclosed	*T-Shirt Size S / M / L/ XL	Age
	Y / N		
	Y / N		
	Y / N		
	Y / N		
	Y / N		
	Y / N		
	Y / N		
	Y / N		

*If you have a CIT in this room, please assign only 5 children for 1/7 ratio and 3 children for a 1/5 ratio.  
\* T-shirt sizes are adult sizes.*

# transformed

The Children's Ministries Office of the Northern California and Nevada District of the Assemblies of God is sponsoring TRANSFORMED Kids Camp 2010. TRANSFORMED is open to all kids ages 8-12.

## Your church is attending:

- ◇ June 28- July 1 - Camp # 1 Jenness Park Christian Camp, Cold Springs, CA
- ◇ July 5-8 - Camp # 2 Sugar Pine Christian Camp, Oakhurst, CA
- ◇ July 12-16 - Camp # 3 North Coast Richardson Grove, Garberville, CA
- ◇ July 19-23 - Camp # 4 Mt. Lassen Camp, Mineral, CA
- ◇ August 9-12 - Camp # 5 YMCA Camp Loma Mar, Loma Mar, CA

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## COST:

## HOW TO REGISTER:

## DEPARTURE TIME:

## RETURNING TIME:

## EMERGENCY CONTACT:

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### Kids Camp Registration

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, St & Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_  
Parents Name(s) \_\_\_\_\_  
Work Phone \_\_\_\_\_ Other \_\_\_\_\_  
Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex \_\_\_\_M \_\_\_\_F  
Church \_\_\_\_\_  
Senior Pastor \_\_\_\_\_  
Emergency Contact Name \_\_\_\_\_  
Emergency Contact Phone \_\_\_\_\_  
T-Shirt Size (*adult sizes*): \_\_\_\_S \_\_\_\_M \_\_\_\_L \_\_\_\_XL  
Cabin mate: \_\_\_\_\_

### Parental Consent

I hereby give permission for my child, \_\_\_\_\_, to participate in the 2010 Kids Camp activities and consent and agree to hold harmless the Assemblies of God Northern California and Nevada District Resource Center, its agents, employees, or volunteer assistants from claims that I (as a parent) might have arising out of my child's participation in this program. I have explained the meaning "hold harmless" to my child, and his/her signature below indicates his/her agreement to do the same.

If it should become necessary for my child to receive medical treatment for any reason, I understand that the Assemblies of God Northern California and Nevada District Resource Center's medical insurance policy acts in a primary position ONLY when the participant is not already covered by insurance. Consequently, I agree to submit all claims first to my insurance company and then to the insurance for the Assemblies of God Northern California and Nevada District Resource Center.

I also accept full responsibility for the cost of medical treatment for any injury not covered by insurance. In addition, I authorize and consent to all medical, surgical, diagnostic, and hospital procedures as may be performed or prescribed by a physician to safeguard my child's health, and it is not advisable to take the time to contact me in advance. I waive my right to informed consent for each treatment.

Moreover, I understand that temporary, emergency measures may be necessary to safeguard my child's health and do hereby authorize and request the Assemblies of God Northern California and Nevada District Resource Center personnel to administer or supervise until such time as my child can be safely transported to a doctor or hospital. Photography and video taping will take place at this event as part of the event records and for future event promotions. By signing I give consent for the Assemblies of God to use any photos or video that includes me or my child for its publications, promotions and records.

\_\_\_\_\_  
(Parent's Name)

\_\_\_\_\_  
(Parent's Signature)

\_\_\_\_\_  
(Child's Signature)

\_\_\_\_\_  
(Date)

### Health & Consent Form

Health Problems \_\_\_\_\_  
Drug allergies \_\_\_\_\_  
Other allergic reactions \_\_\_\_\_  
Polio Vaccination \_\_\_\_ Yes \_\_\_\_ No Last Tetanus \_\_\_\_/\_\_\_\_/\_\_\_\_  
Activity Restrictions \_\_\_\_\_  
Regular medications \_\_\_\_\_  
Insurance Co. \_\_\_\_\_  
Policy No. \_\_\_\_\_  
Physician's Name \_\_\_\_\_  
Physician's Phone \_\_\_\_\_

*\*Both parent and child signature are required\**



# TRANSFORMED KIDS CAMP 2010

## TRANSFORMED 2010 NCN District Kids Camp Partial Scholarship Application

Scholarship Application Deadline for TRANSFORMED 2010 Kids Camp is **May 31, 2010**.  
(All applications must be postmarked no later than May 31, 2010.)

Camp Week Registering for: \_\_\_\_\_ Dates: \_\_\_\_\_

Camper Name: \_\_\_\_\_ Please Circle: Male / Female

Birth date: \_\_\_/\_\_\_/\_\_\_ Grade in fall: \_\_\_\_\_

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

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

Parents/ Guardians Name: \_\_\_\_\_

Church/ City: \_\_\_\_\_

Group Leader Name: \_\_\_\_\_

Group Leader Email: \_\_\_\_\_

Group Leader Cell Phone: \_\_\_\_\_

1. Amount of Camper/ Parent/Guardian/Family contribution: \$ \_\_\_\_\_

2. Amount of assistance from local church: \$ \_\_\_\_\_

3. Signature of Parent/ Guardian: \_\_\_\_\_

4. Signature of Group Leader: \_\_\_\_\_

5. Please describe your reason for requesting this scholarship: (required)

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

Items 1-5 above are **required** to be completed in order to be considered for partial/ full scholarship.

Please mail this form to:

NCN Children's Ministries  
Attn: Kids Camp Scholarship Program  
6051 S. Watt Ave.  
Sacramento, CA 95829  
Fax: 916-379-9652