

Parents, please complete this registration form and mail to the camp office. After the registration form is received, you will receive by email the Summer Camp Health Form. Complete and mail health form to the camp office. Once received, we will send you a confirmation email. Please note that the information contained on the Summer Camp Health Form is confidential and will only be used by our health staff or emergency medical personnel.

ALL SECTIONS MUST BE COMPLETE – Please print CLEARLY – All information is very important.

T-Shirt (please check size): YOUTH: Small, Medium, Large; ADULT: Small, Medium, Large, X-Large, X, 3X, 4X 5X

CAMP CALENDAR. Campers are to pick an event based on grade just completed. Please check appropriate box

Grade	Event	Dates	Fee	After 5/1	True Cost
1 -2	Discovery*	June 8 to 10	\$98	\$113	<u>\$136</u>
□ 3	Young Disciples	June 1 to 3	\$98	\$113	<u>\$136</u>
1 4-5	Junior	June 4 to 8	\$196	\$211	\$272
1 6-8	Chi Rho	July 2 to 7	\$245	\$260	\$340
1 6-8	Chi Rho Spirit Sailing (limit 15)	June 17 to 22	\$320	\$335	\$415
 9-12	2 CYF Spirit Sailing (limit 15)	June 11 to 15	\$320	\$335	\$415
 9-12	2 CYF	June 24 to 30	\$294	\$309	\$408

Make **checks payable to KBY** and send form with fee to:

> KBY P O Box 1332 Madisonville 42431

CAMPER INFORMATION – PRINT THIS INFORMATION. This is needed to contact you in an emergency. Please mail completed, signed form to the address above. Please use a separate form if registering for more than one camp.

*Discovery camp requires an adult with camper and the fee is per person. Both Camper and Adult will need to complete a separate form. Please indicate the name of person you will be attending with ______.

Photography: \square No \square Yes I authorize the making of photographs, motion pictures, videotapes, recordings, or other memorializing of Camp events and the above-named Child's participation therein, and the publication or other use thereof. I waive any right to compensation therefore or any right that I otherwise might have to limit or control such making or use.

First				Last			□ Male	Date of Birth		
Name				Name			Female	Birui		
Grade JUST Completed	Camper Address									
•	Address									
City		County			State, Zip		Phone			
Church				Church City,						
Name				State						
I would like to be i	n cabin with (F	inal assignmen	t at direct	or's discretion)					
r										
Pastor: I understand the camping program is an integral part of the education ministry of the total church and I will help this camper										
understand the purpose of church camp, talking to him/her before and after camp about its meaning. If there are emotional, psychological or family issues that might affect the camper and/or the camp, I will inform the director or Camp Program Manager about these before the										
start of camp. Our church will pay \$on this camper fee.										
Ministor's Signat	uro				Church			Date		
Minister S Signat	Minister's Signature			Church						
Pleas	se complete	this box Ir	nformat	ion in this	box is not shared	bevond t	he Camp I	Business Office		
1100					nclosed with form		ne eamp .			
			-							
Registration Fee		+	\$		Credit Card: Maste	erCard, Visa,	American Expre	ess		
# of Concession Car	ds (\$2	ea.) +	\$		Name on Card:					
Youth Offering		+	\$		Card Number:					
Donation for KBY Ca	pital Campaign (Thank you!) +	\$		Expiration Date:			CVV:		
My Church Pays		-	\$		Zip Code:					
Credit Card Paymen	t Processing Fee	+	\$	5.00						
Total Enclosed \$				Email receipt to:						

Sponsored Event and Activities:

Camp Kum-Ba-Ya provides a variety of supervised activities to children for their physical well-being and social development. Parents have the option of declining permission for specific activities for which they believe their child is physically or mentally unprepared. Usual activities include the following: • Baseball, softball · Food service, serving, bussing, cleaning only Lake swimming · Housekeeping, general cleanup · Basketball, outdoors · Canoeing, kayaking, Class I river (or lake) • Fishing either canoes, dock or shoreline Hiking • Sailing, with or without other children Archery Tether ball • Four Square Dancing · Badminton Volleyball Soccer

Prohibited Activities: □ No □ Yes (If Yes, enter prohibited activities whether or not listed above, for example, "contact sports")

Registration: The undersigned (hereafter "I" or "we" whether one or more) hereby jointly and severally register the above named person to participate in the **Camp Kum-Ba-Ya** (Camp) program. I understand the Camp is sponsored and will be conducted by Camp directors, employees and volunteers, and affiliated organizations, and may involve certain activities, events, and programs.

Consent, Emergency Authorization, Waiver and Indemnification: By registering for the Camp the undersigned jointly and severally state and agree as follows:

Consent For Minors: I am the parent or legal guardian of the above named minor, and I hereby authorize and permit said minor to participate in the Camp and in all activities, events, and programs that are part of or are associated with that Camp, including any activities, events, or programs held at another location, except Prohibited Activities I have named above.

Emergency Authorization: If any medical care or treatment is needed for any injury to or illness my Child, I hereby

- 1. authorize and approve emergency and other treatment of the same;
- request (but do not require) the Camp attempt to contact one or more of the emergency contacts I have told the Camp about and inform them of what has occurred:
- authorize the Camp to arrange for care by, secure transportation to, and/or take my Child to any available doctor, dentist, source of emergency treatment, hospital, or other source of medical or dental treatment; and
- agree I am responsible for any and all costs of and expenses associated with any of the same, and I hereby indemnify, hold harmless, and defend the Camp from and against any claims for the same.

I hereby authorize the Camp to release any information submitted in this Registration form or otherwise in Camp's possession to any emergency or other medical providers and to staff associated with the Camp.

Additional Responsibilities: Without in any way limiting the extent or scope of the foregoing, I have notified the Camp of any and all restrictions on Participant's participation in camp activities. Said restrictions include, without limitation, any food, chemical, and/or other allergies or susceptibilities and any other kinds of health conditions, considerations, or needs (such as, without limitation, any physical, emotional, or mental conditions or illnesses). I also agree to notify Camp promptly upon any change to any of the same or any of the above-stated contact information and to withdraw the above-named Child from any camp activities in which (s)he is or should be restricted or prohibited from engaging.

PERMISSIONS AND RECOMMENDATIONS – SIGNATURES REQUIRED

Acknowledgement and Waiver -- I realize that participation in the Camp entails certain risks of personal injury and property damage, which risks include, but are not limited to, the possibility of injury or death related to swimming and boating, physical activity, use of Camp equipment and facilities, and the like. I also understand and agree that I am solely responsible for the above-named Child's transportation to and from the Camp, and I affirm and agree that the above-named Child is participating in the Camp voluntarily and I knowingly assume all such risks. In consideration of the above-named Child being allowed to participate in the Camp, I hereby, on behalf of myself, above-named Child, and our respective assigns, beneficiaries, heirs, personal representatives, trustees, and other successors or representatives, voluntarily and forever release, waive, and discharge the Camp, and their respective employees and representatives, from and against, and hereby covenant not to sue any of them regarding, any and all causes of action, claims, damages, injuries, liabilities, or losses (including, without limitation, such that may in any way arise from, be connected with, or relate in any way to the Camp or the negligence of the Camp management, or any of their respective employees or representatives) arising out of or in any way resulting from the Camp or the above-named Child's participation in or involvement with the Camp or any related activities or programs.

Indemnification: In return for sufficient good and valuable consideration, I hereby indemnify, hold harmless, and defend the Camp from and against any and all causes of action, claims, damages, injuries, liabilities, or losses that in any way arise out of, are connected with, or result from the above-named Child's participation in or involvement with the Camp or any related activities or programs. Such indemnification and hold harmless terms shall apply and be fully enforceable even if such injury or damage arises out of the negligence of the Camp, or any of their respective directors, employees, officers, agents, or representatives and shall include, without limitation, the Camp's reasonable attorney's fees associated therewith.

I, on behalf of myself and my Child and our respective assigns, beneficiaries, heirs, successors, and other representatives, agree that the waiver and release, assumption of risk, and indemnification, hold harmless, and defense provisions stated herein are intended to be as broad and inclusive as is permitted by the laws of the State of Kentucky and that if any portion thereof is held invalid, the balance shall, notwithstanding such invalidity of any portion, continue in full force and effect.

I have read this document, fully understand its terms, and understand that I, on behalf of myself and the above-named Child, am through this document giving up substantial rights, including, among others, the right to sue and undertaking substantial obligations, including, among others, indemnification. I acknowledge that I am agreeing hereto freely and voluntarily, and intend this acknowledgement (whether hard copy or electronically transmitted) to be a complete and unconditional release of liability.

Custodial Parent or Legal Guardian

signature required

Print name

x

Date____

Non-Custodial Parent

signature required

Print name

Date_

Camper/Participant: I have read and agree to the following covenant. I will be respectful to all persons and the camp environment at all times. I understand that possession of drugs, alcohol, tobacco or weaponry of any sort (knives, firearms, etc.) while at camp is prohibited and I will be sent home if these items are found in my possession. Radios, boom boxes, electronic entertainment devices, cell phones, pagers and beepers are disruptive to the camp community, and I will not bring them to camp. I covenant to enjoy camp as an opportunity to come to know God through nature and through other people, and I will participate fully in camp activities so I can get the most out of summer camp. I will not damage camp property and will be held financially responsible for any repairs needed as a result of my actions. I understand that food should not be brought to camp. I understand that I may be sent home for behaving consistently in a way that does not reflect Christian love and grace.

Camper X

Date___

Christian Church In Kentucky/Camp Kum-Ba-Ya/CCK-West Area is not responsible for personal items that are lost, stolen or broken at camp. In case of willful damage to camp property, we may be responsible for repairs.

Camper and Parent initial.

Church Office: If cancellation is necessary notify the Camp Business Office. All cancellations are subject to a \$15 administration fee withheld from the refund. No camp fees will be refunded for no-shows.