

Pittsylvania Christian Service Camp

Summer Camp 2008 Registration Packet

Greetings from Camp!

An exciting summer of fun, faith and fellowship is in store for 2008. Several changes have been made to better serve campers and their families. Parents and guardians, please take a moment to read through this Registration Packet and note the changes to the summer schedule and completed grades. Both sides of the Registration Form **MUST** be completely filled out and **SIGNED** by a parent or guardian for your camper to be registered in a Summer Camp. Return it by mail with your Pre-Registration Deposit (\$35) to secure a spot. More details are inside, including: Camp Fees, Early Bird Deadline, What to Bring, What to Leave, and much more. If you still have any questions, you may contact the camp office by email or phone. I look forward to seeing you at camp.

Scott McClimans, Camp Pitt Manager

Registration Information

- Camp Fees for each week are listed on the Registration Form. Campers should register for weeks based upon the grade they will complete in Spring 2008.
- Registrations will be processed on a “first come, first served” basis provided that: the form is completely filled out and signed by a parent or guardian; the form is received with the non-refundable pre-registration deposit; the camper is registering for his/her grade level; and, the camp week is not at full capacity. Full capacity is 105 for Senior High, Middle School, Junior and Intermediate Weeks. First Timers camps have a capacity of 50. Capacity for Wilderness Weekend will be determined by the Wilderness Week Dean.
- An Early Bird Discount of \$25 will be applied to all registrations postmarked on or before May 19, 2008. Registrations postmarked after May 19, 2008 will be charged the Standard Rate for that week.
- All registration balances are due at Check-In on the first day of the week in attendance.
- Check-In Time/Procedure:** Check-In will begin at 3:00 PM on the first day of the camp in session and will end at 5:00 PM. After the check in process is completed, the camper will be given a “Checked-In” card. The camper can then proceed to the dorm, and a staff person will help the camper select a bunk and record the camper’s name and location in the dorm. Campers will not be allowed in the dorm until they have completed Check-In. Dorms will not be open before 3:00 PM. Please Check-In BEFORE unloading your belongings.
- In order to have the best camp experience, Camp Pitt recommends campers participate in the complete week of camp. Parents or guardians may pick-up their camper during the week if it is necessary for them to leave for some reason. Please notify the Camp Dean or Registration Staff at Check-In if you plan to pick up your camper during the week. You will be asked to sign out the camper before leaving and sign in when you return. Please do not leave until you have signed out.
- Dismissal is at 1:00 PM on the last day of the camp session. After campers have been signed out on the last day of their camp session, they will receive their picture and be dismissed. Please make arrangements to pick up your camper at 1:00 PM. Campers will only be dismissed to persons approved by the parent or guardian for pick up. Please name those authorized to pick up on the Registration Form. Please do not leave with your camper until you have signed out.

Registration Information (continued from page 1)

- The Medical and Emergency Contact Information form must be completed to register your camper. If your camper has any medical conditions or brings any medications to camp, you must see the Nurse at Check-In. All medications must be brought in their original container, turned over to and dispensed by the Camp Nurse. Exceptions will be made for certain inhalers and epinephrine pens, but they must still be registered with the Camp Nurse at Check-In on the first day of the camp session.
- Camp Pitt will provide medical co-insurance for all participants. The family or individual medical policy will be primary. The camp's policy is secondary, and will pay eligible costs as determined by the camp's insurance provider to the limit of the policy.
- Confirmations will be sent by email or U.S. Postal Service. If you prefer email (we do), please provide your email address on the Registration Form.

New Wilderness Weekend: August 8-10, 2008

Wilderness Weekend will include camping, hiking & biking in and around the Grayson Highlands/Mount Rogers National Recreation Area in Southwest Virginia. Wilderness Weekend is open to campers who have completed grades 6-12. The Early Bird Discount & Deadlines apply. See page 1 for details. Additional information (ie. check-in, departure & return times, what to bring & specific activities) will be mailed or emailed to registered participants. Campers and their parent/guardian may be required to attend an orientation meeting before the day of departure.

What to Bring

Clothes: Everyone is expected to abide by the camp dress code. Modesty shall prevail in regard to clothing. The Camp Dean applies what is appropriate and has the authority to ask anyone to change clothes that fall outside of the camp's guidelines. Dress casually for typical Southside Virginia summer weather. The following items are not permitted: offensive logos or art work; mini skirts, spaghetti straps, tank tops, bare stomachs; pants or shorts that sag below the waistline; low-cut, revealing or tight fitting tops, pants or shorts; pants or shorts with writing on the seat; two-piece swim suits or competition ("Speedo") swim briefs. Shorts must have a minimum 4" inseam. At least a daily change of clothes, undergarments and socks is recommended (and appreciated). Remember rainwear and extra clothes for recreation and special activities.

Footwear: Shoes must be worn everywhere at camp except in the pool area and in the dorms. Bringing an extra pair of shoes is a good idea.

Bedding & Toilet Articles: Sheets, pillow, blanket or sleeping bag; towels, washcloths, soap, shampoo, toothpaste and brush, comb/hairbrush; anti-perspirant/deodorant, sun block, and insect repellent (test at home first).

Other Items: HOLY BIBLE, notebook or journal, pens or pencils; money for missions; stamps & stationery; flashlight, camera and extra batteries.

What to Leave at Home

- Pets, radios, CD players or any personal electronic media device(ie. PDA, laptop, gaming device, MP3 player, iPods, GPS, and Cell Phones), magazines, toys, games, playing cards or prank items. Cell Phones must be turned in to the Dean on the first day of camp and will be secured in the camp office during the week.
- Tobacco products, drugs, alcohol or other controlled substances; weapons or explosives of any kind.
- Food, snacks and money for snacks. Each camper's registration fee includes \$10 to spend at the canteen. No food of any kind will be allowed in the dorms.

Camper Rules of Conduct

- The Camp Dean and the Manager are the representatives of the Camp Board of Directors and have complete authority over the camp, all personnel, and property in accordance with their responsibilities as set forth by the Directors.
- Every camper is expected to agree to & comply with the camp's code of conduct & camp rules.
- The complete camp code of conduct, camp rules, and disciplinary policy will be reviewed with campers on the day of Check-In.

Camper Information

Mail & Email: Mail sent to campers during their stay at camp should be addressed: (Campers Name) c/o Camp Pitt, 1232 Oxford Road, Chatham, VA 24531. Include return address on the envelope. Be sure to send mail far enough in advance that it will arrive during your camper's week. Please do not send food. Email will not be forwarded to campers.

Phone Use: The camp phone is for camp business and emergencies only. Please do not make calls to campers unless there is an emergency. Campers are not allowed to call home unless permission is given by the Camp Dean. The Dean or Camp Nurse will contact parents in the event of an emergency or illness.

Visitors: Visitors and parents are welcome at camp. However, they must not interrupt the camper's schedule. It is suggested that visits be limited to two hours in the evening, preferably late in the week. If a camper becomes easily homesick, it is recommended that no visit be made. Please cooperate with this policy for the well being of your camper.

Visitor Meals: If you plan to eat with your camper, please notify the camp office at least 24 hours before your visit so the kitchen staff can make preparations. Visitors will be accommodated after campers, faculty and staff have been served. During large weeks, it may not be possible to accommodate visitors for meals. All meals cost \$5.00 for adults and \$3.00 for children 12 and under.

2008 CAMP PITT REGISTRATION FORM

CAMPER INFORMATION

Camper Name: _____ Date of Birth: _____ Circle One: Male / Female

Address: _____ City: _____ State: _____ Zip: _____

Send Confirmation by Email? Yes / No Email Address: _____

Home Phone: _____ Other Phone: _____

Grade Completed ('07/'08): _____ Camper is an immersed believer? Yes / No 1st time at Camp Pitt? Yes / No

Emergency Contact: _____ Relationship: _____

Emergency Phone: _____ Other Phone: _____

Church Camper Attends: _____

Persons authorized to pick up camper: _____

Is anyone restricted from picking up or having contact with camper? Yes / No If "Yes," name below.

Please circle T-shirt size. YOUTH SIZES: **S M L** ADULT SIZES: **S M L XL XXL**

WHICH WEEK WILL THE CAMPER ATTEND?

- | | | | |
|--|--------------|---------------|--|
| <input type="checkbox"/> Senior High | Grades 9-12 | June 15-20 | Cost: \$110 by May 19 Deadline; after Deadline: \$135.00 |
| <input type="checkbox"/> Middle School 1 | Grades 6-8 | June 22-27 | Cost: \$110 by May 19 Deadline; after Deadline: \$135.00 |
| <input type="checkbox"/> Middle School 2 | Grades 6-8 | July 6-11 | Cost: \$110 by May 19 Deadline; after Deadline: \$135.00 |
| <input type="checkbox"/> First Timers 1 | Grades K & 1 | July 13-15 | Cost: \$60 by May 19 Deadline; after Deadline: \$85.00 |
| <input type="checkbox"/> First Timers 2 | Grades K & 1 | July 16-18 | Cost: \$60 by May 19 Deadline; after Deadline: \$85.00 |
| <input type="checkbox"/> Junior | Grades 2 & 3 | July 20-25 | Cost: \$110 by May 19 Deadline; after Deadline: \$135.00 |
| <input type="checkbox"/> Intermediate | Grades 4 & 5 | July 27-Aug.1 | Cost: \$110 by May 19 Deadline; after Deadline: \$135.00 |
| <input type="checkbox"/> Wilderness Weekend | Grades 6-12 | August 8-10 | Cost: \$60 by May 19 Deadline; after Deadline: \$85.00 |

Make All Checks Payable to: CAMP PITT

- | | Check # |
|---|---------|
| I am including : <input type="checkbox"/> \$35.00 Non-refundable deposit (balance due at Check In) | _____ |
| <input type="checkbox"/> \$110.00 Complete Early Bird Registration Fee | _____ |
| <input type="checkbox"/> \$135.00 Complete Standard Registration Fee | _____ |
| <input type="checkbox"/> \$60.00 Complete Early Bird First Timers or Wilderness Weekend Fee | _____ |
| <input type="checkbox"/> \$85.00 Complete Standard First Timers or Wilderness Weekend Fee | _____ |
| <input type="checkbox"/> _____ Other amount
(minimum \$35.00; balance due at Check In) | _____ |
| <input type="checkbox"/> Church Scholarship or <input type="checkbox"/> COW / <input type="checkbox"/> COW Runner-Up
Balance Due at Check In _____ | _____ |

This registration was Postmarked ____/____/____ and received at Camp Pitt on: ____/____/____. {CAMP USE ONLY}

Mail to: Camp Pitt, 1232 Oxford Road, Chatham, VA 24531

2008 CAMP PITT REGISTRATION FORM

MEDICAL AND EMERGENCY CONTACT INFORMATION

This form must be completely filled out and signed for your camper to participate in any camp program.

Camper Name: _____ Date of Birth: ____/____/____

Parent /Legal Guardian Name: _____

Parent / Legal Guardian Phone: _____ Other Phone: _____

Alternate Emergency Contact: _____ Relationship to camper: _____

Alternate Emergency Contact Phone: _____ Other Phone: _____

Health Insurance Provider: _____ (if not insured, mark "no insurance")

Health Insurance Policy #: _____ Group #: _____

Name under which camper is insured: _____

Medical History

Has the camper ever been diagnosed with any of the following? Please check ALL that apply and detail as necessary.

- | | | | | |
|--------------------------------------|---|--|--|--|
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Gastrointestinal Disorder / Disease | <input type="checkbox"/> HIV | <input type="checkbox"/> Seizures |
| <input type="checkbox"/> Bed Wetting | <input type="checkbox"/> Ear Infections | <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Meningitis | <input type="checkbox"/> Sleep Walking |
| <input type="checkbox"/> M.R.S.A | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Hepatitis | <input type="checkbox"/> Rheumatic Fever | <input type="checkbox"/> Tuberculosis |

Does the camper have any Allergies? Yes No If "Yes," describe reaction and management below:

Are any prescription or over-the-counter medications being brought to camp? Yes No Please list below.

Medication	Dosage	Time & Frequency	Treating Condition
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Is the camper permitted to : Engage in Sports? Yes No Swim? Yes No Swim in 5ft End of Pool? Yes No
Participate in Low Challenge Course Activities? Yes No

Program Participation, Medication Permission & Medical Consent/Release

I, the parent or guardian of the camper named on this form, give my permission to the camp nurse and/or other authorized personnel at Camp Pitt to distribute over-the-counter remedies or medications for minor needs such as: headache, fever, minor pain, minor allergic reactions, upset stomach, minor injuries; and, to dispense prescription and over-the-counter medication designated and provided by the the parent/guardian or family physician.

I, having the authority to consent for the minor's health care, do hereby delegate my authority to consent to said minor's care (named on this card) to Camp Pitt. I grant permission for the caregiver to request and authorize any and all examinations, medical treatments, and/ or procedures to or for the benefit of the minor as may be deemed advisable or appropriate by any physician licensed to practice medicine. I understand however that every effort will be made to contact me in case of such emergency and if possible, before any such medical treatment is administered. Furthermore, I understand that completion of this form with my signature grants permission for the named camper to participate in a Camp Pitt program. I also understand that camp insurance coverage is secondary coverage and I am responsible for any medical cost that may occur on behalf of the camper. I release Camp Pitt staff, faculty, officers, and management from any liability and shall not hold them responsible for any lost, stolen or misplaced personal property. Camp Pitt is hereby granted to use video, audio, and photographic materials of named camper, taken while participating in or attending a camp program, to promote and market Camp Pitt and its ministry.

PRINT PARENT/GUARDIAN NAME

PARENT/GUARDIAN SIGNATURE

DATE

Sign In: _____ Sign Out: _____