



# CAMP CYOKAMO

## REGISTRATION PACKET



The following are policies and procedures which need to be called to your attention for the safety and security of Camp CYOKAMO, Camp Sponsors and campers.

### **Camper Policies:**

- Every camper is required to conform to the camp schedule. No absences are allowed from scheduled activities unless permission is given by the Camp Nurse. Those who are ill will stay in the Nurses' station until sent home or able to resume their schedule.
- In cases of willful disobedience, the Camp Dean, in cooperation with the campers' Minister/Sponsor, reserve the right to send a camper home.
- Any camper leaving the camp before his or her week of camp is over will not receive a refund of their camp fee.
- Sickness/injury should be reported to the Camp Nurse immediately.
- In matters of dress, modesty must prevail. Modest swimwear required: no bikinis or swim briefs will be allowed.
- Dorms of the opposite sex, as well as the areas in front of the dorm doors, are off limits at all times.
- The use of tobacco, drugs, alcohol, vaping or marijuana products is prohibited.
- Undesirable language will not be permitted.
- No fireworks or excessive noisemakers allowed.
- No electronic devices allowed for campers. Cell phone usage is also prohibited for campers.
- No picture taking in the dorms.
- No camper will be permitted to leave the camp without consent of the Lead Minister from that camper's church.

### **Mess Hall/Food Policies:**

- Campers are to stay out of the Mess Hall except at meal times or when given permission to do so otherwise.
- Cups, trays, and utensils are to be kept in the Mess Hall.
- **NO FOOD IN THE DORMS!** The main reason is to keep the critters out. Food brings mice which brings snakes, etc.

### Visitor Policies:

- All visitors are required to sign in and out at the Camp Office in the Visitor Notebook, and register vehicles upon check-in. Visitors will receive a sticker that must be worn on campus.
- No visitor will be allowed to interfere with campers' regular activities while in camp. Those visiting camp must abide by the camp rules.
- Visitors must plan to sign out by 9:00 pm, or the end of Chapel.

### Camp Sponsor Policies and Camp Registration Procedures:

- All campers must complete a **"Camp CYOKAMO Registration Form."**
- All Camp Sponsors must complete a **"Camp CYOKAMO Worker Disclosure Form."**
- All Student Camp Sponsors are required to sign a **"Camp CYOKAMO Student Camp Sponsor Covenant."**
- Each church must provide at least one male and one female Adult Camp Sponsor when male and female campers from that church are in attendance.
- It is recommended to have a 1:10 ratio of sponsors to students.
- For the safety of the campers and the integrity of our Camp Sponsors/Staff, please avoid a 1:1 sponsor/camper ratio in the dorms.
- All Camp Sponsors will be expected to set the example by following the same regulations and rules as campers in matters of dress and conduct.
- Church Leaders must keep a written record of campers and/or Camp Sponsors coming and going from camp. Use the **"Camp CYOKAMO Camper/Sponsor Check Out/Check In Form."**
- Bracelets will be required for ALL registered campers and sponsors. Bracelet colors change weekly. Sponsors and campers will have two different colors of bracelets.
- Camp Sponsors/Church Leaders must complete the **"Camp CYOKAMO Vehicle Registration Form"** and turn it in at registration.
  - Churches can temporarily park in front of the Mess Hall to drop off campers and luggage, but then should quickly move their vehicles to the Parking Area to make room for the next church to unload.
  - All other vehicles should be parked in the designated Camp Sponsor parking area.



## CAMP CYOKAMO Registration Check List

- ☐ Submit **"Camp CYOKAMO Church Registration Form"**
  - ☐ Receive bracelets for Sponsors and Campers
- ☐ Submit **"Camp CYOKAMO Registration Forms"** for each Camper
  - ☐ Group together forms of Campers participating in paintball
- ☐ Submit **"Camp CYOKAMO Worker Disclosure Forms"** for all your Employees and Camp Sponsors  
***This step must be completed before you will receive your Canteen Cards.***
- ☐ Submit **"Student Camp Sponsor Covenants"** for all Student Camp Sponsors
- ☐ Submit **"Camp CYOKAMO Vehicle Registration Form"**
  - ☐ Receive your Parking Passes
  - ☐ Tag vehicles staying on campus ***before first Chapel***
- ☐ Drop off Camper medicine to Camp Nurse in Camp Office
- ☐ Pay final camp fee balance in Camp Office
- ☐ Pick up Canteen Cards and T-Shirts. ***Please make sure all Canteen Cards have been filled out with Camper name and Church name.***



Church Name: \_\_\_\_\_

Week of Camp: \_\_\_\_\_

Breakdown of Attendees	Number of Males	Number of Females	Total
<b>Total Number of Campers</b>			
Ministers			
Adult Sponsors			
High School/Middle School Student Sponsors			
<b>Total Number of Sponsors</b>			

Camp T-Shirts	Number of Shirts
Youth Small	
Youth Medium	
Youth Large	
Adult Small	
Adult Medium	
Adult Large	
Adult XL	
Adult 2XL	
Adult 3XL	

[illegible]



# CAMP CYOKAMO Registration Form

Name\_\_\_\_\_ Male / Female Age\_\_\_\_\_ Grade Entering\_\_\_\_\_

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

Shirt Size (Circle One)      YS      YM      YL      AS      AM      AL      AXL      A2XL      A3XL

Have you been baptized?      YES      NO

Parent/Guardian #1 Name\_\_\_\_\_ Phone\_\_\_\_\_

Parent/Guardian #2 Name\_\_\_\_\_ Phone\_\_\_\_\_

Emergency Contact Name\_\_\_\_\_ Phone\_\_\_\_\_ Relationship\_\_\_\_\_

Child is attending the following camp (Circle One)      Elementary      Junior High      High School

Child is attending with? Church Name\_\_\_\_\_ Sponsor Name\_\_\_\_\_

## MEDICAL INFORMATION

Last TETANUS Booster\_\_\_\_/\_\_\_\_/\_\_\_\_ Known allergies and reactions\_\_\_\_\_

Other Health Concerns\_\_\_\_\_

Recent surgery, injury or condition that might restrict your child from participation in camp activities\_\_\_\_\_

I allow CYOKAMO to give my child over-the-counter medication (Ibuprofen/Benadryl) for minor medical treatment.      YES      NO

**\*\*\*All medicine is to be left with and dispensed by the camp staff.\*\*\***

Physician Name\_\_\_\_\_ Physician Phone\_\_\_\_\_

Medical Insurance Company\_\_\_\_\_ Policy #\_\_\_\_\_

Company Address\_\_\_\_\_ Company Phone\_\_\_\_\_

## PERMISSIONS

- I allow my child to leave the CYOKAMO campus for off-campus activities during the week of camp.
- I allow CYOKAMO to use photographs or video footage shot at camp of my child for the use of promotional materials.
- I allow CYOKAMO Camp Management to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child as named on this form. I understand that every effort will be made to contact me in case of such an emergency and, if possible, before any such medical treatment is administered. I release the camp from any responsibility other than normal supervision and care. In case of accident, I will not hold CYOKAMO or any staff members, management, or officers liable unless guilty of negligence.
- All of the above medical information on my child is correct.
- In consideration of the privilege of participating in CYOKAMO recreational activities (including Archery Tag): Guest agrees to exercise caution and to obey all instructions of the CYOKAMO Staff. I give permission for any medical treatment that the CYOKAMO staff may deem necessary in case of emergency. Guest (and Guest's parent or legal guardian, if Guest is under 18) UNCONDITIONALLY RELEASES AND ABSOLVES Camp CYOKAMO, its staff, cooperative churches and all other persons from any and all liability in connection with any injury or death of Guest, or damage to property, sustained while participating in CYOKAMO recreational activities (including Archery Tag), including specifically any negligence of Camp CYOKAMO and its staff; and agrees to INDEMNIFY AND HOLD HARMLESS Camp CYOKAMO and the cooperative churches, its staff, and all other persons from any and all damages, costs, and expenses that any of them may incur in connection with, therewith, including for their own negligence, or in connection with evacuation or medical treatment.

I have carefully read, understand and agree to the above statements.

\_\_\_\_\_  
Signature of Parent/Legal Guardian or Participant if 18 or older      Date\_\_\_\_/\_\_\_\_/\_\_\_\_



CAMP CYOKAMO

## Worker Disclosure Form

Volunteers and Employees

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

Phone: \_\_\_\_\_

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

Age range: \_\_\_\_ 17 or younger \_\_\_\_ 18-25 \_\_\_\_ 26 or older

Camp Weeks: \_\_\_\_\_

Church Name: \_\_\_\_\_

### Have you ever:

Been arrested for any reason? \_\_\_\_\_ Yes \_\_\_\_\_ No

Been convicted of, or plead guilty or no contest to any crime? \_\_\_\_\_ Yes \_\_\_\_\_ No

Been engaged in or accused of any child molestation, exploitation, or abuse? \_\_\_\_\_ Yes \_\_\_\_\_ No

### Are you aware of:

Having any traits or tendencies that could pose any threat to children, youth or others? \_\_\_\_ Yes \_\_\_\_ No

Any reason why you should not work with children, youth or others? \_\_\_\_ Yes \_\_\_\_ No

If the answer to any of these questions is "yes," please explain in detail: \_\_\_\_\_

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

- I recognize that Camp CYOKAMO is relying on the accuracy of the information I provide on the Camp CYOKAMO Worker Disclosure Form. Accordingly, I attest and affirm that the information I have provided is absolutely true and correct.
- I authorize the organization to contact any person or entity deemed necessary to collaborate the information provided on this Camp CYOKAMO Worker Disclosure Form, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.
- I voluntarily release the organization and any such person or entity listed on the Camp CYOKAMO Worker Disclosure Form from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary.
- I have carefully read the policy and procedures of the organization, and I agree to abide by them and to protect the health and safety of the children or youth assigned to my care or supervision at all times.

Printed Name: \_\_\_\_\_

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



CAMP CYOKAMO

## Student Camp Sponsor Covenant

**I will view the role of Student Camp Sponsor as a *leadership and service opportunity*.**

- I am at least one year removed from the camp week that I have been asked to sponsor.
- I will serve all Ministry Leaders respectfully and obediently.
- I will follow the designated camp schedule.
- I will never be alone with a Camper of the same/opposite sex.
- I will treat all Campers with purity and respect.
- I will respect the midnight Student Camp Sponsor curfew (or curfew set by the dean).

**Student Signature:** \_\_\_\_\_

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





# CAMP CYOKAMO Vehicle Registration Form

Church Name: \_\_\_\_\_

[illegible]



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

Primary Sponsor: \_\_\_\_\_

[illegible]