



Alaska District Kids Camp

2009

Camp 1
Ages 7-9
July 6-10

Camp 2
Ages 10-12
July 13-17

Little Beaver Camp
Big Lake, Alaska

"Grab Bag" Swimming Puppets
Friends Games Skits

\$165 per child
(before June 5th)
\$175 by Deadline:
June 26th, 2009

For registration and info
contact Pastor Pam Hodges
@ 907-330-2108

pamhodes@mcaonline.org

Little Beaver Kid's Camp

Big Lake, Alaska

**REGISTER EARLY LIMITED
SPACE AVAILABLE**

Camp Cost

PRE-Registration Discount

by June 5 - \$165

REGISTRATION After 6-5-09 - \$175

Registration Deadline June 26, 2009

A non-refundable \$50 deposit will secure your registration & is included in the cost.

HEALTH

- There is a full-time health care professional on duty at all times. Doctor on call.
- A lifeguard is on duty during swimming times.
- All swimmers will wear a life vest and the buddy system will be used.
- Swimmers will wear a wrist band designating their swimming skill level.
- Swimmers WILL wear modest, one-piece swim wear.

WHAT TO BRING

- Bible
 - Sleeping bag
 - Towel
 - Toothpaste & toothbrush
 - Pillow
 - Soap
 - Washcloth
 - Comb
 - Practical clothing for camping
 - Light jacket and/or raincoat
 - Modest one-piece swimming suit.
- Please label clothing**

Camp Start & End Times

First Day of Camp:

4:00pm– Camper rooms assigned (Roommate requests must be made in writing).

5:30pm– First meal served.

Last Day of Camp:

12:00 (noon)- Last meal served

12:30pm– Pick-up deadline

To avoid a **\$25** late fee plan to pick up your child **NO** later than 12:30 p.m.

Snack-Shack

Each camper will need money for snacks, pop, & offerings for the week. Money will be deposited in the Camp Bank for safe keeping. Spending cards will be issued. All unspent money will be returned.

DO NOT BRING

- Toys
- Radios
- CD Player or MP3, iPod, Game Boy.

Please leave all valuables at home. Little Beaver Camp will NOT be responsible for any possessions that may be lost or stolen.

SERVICES! Each morning and evening service features age appropriate service with **DYNAMIC SPEAKERS**, kid's worship, and **Biblical instruction**. Watch for **puppets**, dramas, **object lessons** and more!

CLASSES! Possible morning classes campers may choose to attend: drama, canoeing, **basketball**, and more

RECREATION! Kids Camp offers exciting afternoons of organized recreation for all to participate in with **swimming everyday**. "Grab Bag" closes out the afternoon with **lots of laughs!!**

*****PLEASE NOTE***** Children who cannot obey camp rules will be sent home.

*** LITTLE BEAVER KID'S CAMP ***

Registration Form 2009

- Yes! I am attending KIDS CAMP 1: July 6-10 Ages 7-9
- Yes! I am attending KIDS CAMP 2: July 13-17 Ages 10-12

PLEASE PRINT CLEARLY

Camper's Name

Address City State Zip

Male/Female Age Date of Birth Grade just completed

Print Name of parent or legal guardian Primary Phone # During Camp

I will abide by the camp rules. *(signature of camper)*

I will be responsible for my child's behavior. I understand that my child may be photographed for the purpose of camp promotion. *(signature of parent or guardian)*

Signature of Pastor or representative

IMPORTANT - PRINT E-MAIL ADDRESS

PLEASE TURN FORM OVER AND COMPLETE OTHER SIDE

OFFICE USE ONLY

Registration Fees: Date Rec'd:

Amount Due: Paid in Full:

Ck# Cash

Make checks payable to:

ALASKA DISTRICT

Mail registration & check to:

Pastor Pam Hodges

7041 DeBarr Road

Anchorage, AK 99504

TO PRE-REGISTER: \$50.00 NON-REFUNDABLE REGISTRATION FEE MUST BE INCLUDED WITH **COMPLETED & SIGNED** REGISTRATION FORM AND POSTMARKED ***NO LATER THAN JUNE 26***

Camp Photo CDs: \$10 each

For more information contact us:

Little Beaver Kid's Camp Director:

Pam Hodges, Children's Pastor

(907) 337-9495 or pamhodges@mcaonline.org



Health Cert



PRINT CLEARLY:

Child's Name: _____

Phone: _____ Email: _____

All medications you send with your child **must** be packaged in the original container with pharmacy label attached. This includes all inhalers and aerosol treatments for asthma. **Do not send** over the counter medications such as Tylenol and Tums.

DOES THE CAMPER HAVE ANY OF THE FOLLOWING: (Check appropriate answer.)

YES	NO	
_____	_____	Allergies (food/medications/insects etc) List:
_____	_____	Asthma
_____	_____	Diabetes
_____	_____	Ear problems
_____	_____	Heart trouble
_____	_____	Lung problems
_____	_____	Sinus infections
_____	_____	Skin trouble
_____	_____	List other:

On a separate sheet of paper list **all** medications and other health concerns that we should be aware of.

WATER SAFETY

My child has permission to swim in Little Beaver Lake.

_____ Yes _____ No

Parental Signature

My child has the skill to swim at the following level: (circle one)

Non-swimmer
Advanced

Intermediate

Students will be required to wear a wristband which will signify the level at which they can swim. Students will be restricted to certain swimming areas based on their skill. Only intermediate and advanced swimmers will be allow to go on the blob, canoes and paddleboats. Students will also wear a life-vest at all times and the buddy system will be used.

Date of last Tetanus shot: _____

Has your child been under medical care, had any surgical procedures, dental extractions, etc. within the past three months? If so, please list on a separate piece of paper.

I have listed all special medical needs and/or conditions my child may have.

I hereby give my consent for this camper to be treated by authorized personnel for any sickness, injury, or accident which may occur.

Signature of Parent or Legal Guardian

Date