

2012 BCBA REGISTRATION ~~of~~ SESSION: _____ DATES: _____

Campers or sponsors 18+ years old may complete and sign this form by themselves. Do not leave anything blank! If your answer is "none", type in "N/A". **EVERY CAMPER** (Sponsors, Camp Pastor, Musicians, Minors, etc) must complete this form. Sponsors must also complete the "SPONSOR APPLICATION".

CAMPER INFORMATION

Name: _____

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

Birth date ____/____/____ Grade Completed: _____ Home # (____) - ____ - _____ Mobile # (____) - ____ - _____

Name of Church/Group (and community) camper will be with: _____

T-Shirt Size (circle one): **Child** S, M, L, XL (or) **Adult** S, M, L, XL, XXL, XXXL

Camper's Sponsor name (if under 18): _____ Mobile # (____) - ____ - _____

Person To Notify In The Event Of An Emergency: _____

Relationship to camper _____. Work# (____) - ____ - _____ Mobile # (____) - ____ - _____

Physical Limitations (Asthma, diabetes, allergies, etc.), and or special instructions (Allergic to certain medications, food allergies, rare blood type, wear contacts, etc.):

Date of last tetanus shot: ____/____/____. List all the medications that are being brought to the camp.

Medication #1: _____

Special Instructions (dosage, times, etc): _____ (see back)

Medication #2: _____

Special Instructions: _____ (see back)

Medication #3: _____

Special Instructions: _____ (see back)

MEDICAL, SURGICAL, AND OTHER REQUIRED WAIVERS

I, _____, parent and /or legal guardian of _____, minor, hereby acknowledge that said minor is presently under my care, custody, and control. I give my child, the said minor, my express permission to attend Big Country Baptist Assembly (hereafter referred to as BCBA) between the dates listed above. I further expressly grant my permission for my child, said minor, to participate in all activities of said camp with the following listed exceptions:

I have listed above said minor's physical conditions or medical problems that may need attention, and all medications regularly used by said minor. In the event there arises an emergency necessitating medical or surgical attention, I hereby consent and give my permission to BCBA, its representatives, or my dependent child's Camp Sponsors, or any attending physician of the above stated dates to make such decisions and/or to perform such medical treatments upon my said minor dependent which may, in their sole discretion, be considered necessary.

Furthermore, I do release, acquit, discharge, and covenant to hold harmless the BCBA, its representatives, or my dependent child's Camp Sponsors, or any attending physician of the above dates, from any and all actions, damages, or liabilities arising out of any injury or any sickness (or the treatment of any injury or any sickness) that occurs during my dependent minor's stay at BCBA. I also understand and agree that the local Shackelford County Court would be the point of venue should a legal disputes arise as a result of my child's stay at BCBA during the above dates.

I consent and give permission to the BCBA staff to inspect the bunkhouses for the safety and protection of all BCBA campers present, if unusual circumstances make such an inspection necessary. I give my full consent and permission to BCBA staff to use my child's photo for BCBA promotional purposes. I also consent and give permission for my child, at his/her own discretion, to participate in counseling sessions while attending BCBA.

I have read the "2012 BCBA Policies and Procedures" and explained them to my minor child. We both understand that my child will be dismissed from camp and sent home without refund and at my expense if he/she does not adhere to these policies. Besides the sponsor listed above, I hereby authorize the following person(s) to pick up my child from the BCBA grounds:

Name: _____ Name: _____ Name: _____

CAMPER SIGNATURE: X _____

PARENT/LEGAL GUARDIAN SIGNATURE: X _____

Sign and Mail to: BCBA, P. O. BOX 248, Lueders, Texas 79533

PLEASE CONTINUE ONLY IF you're an adult (18+) attending BCBA for 3 or more nights while minors are present.

2012 BCBA SPONSOR APPLICATION

Other Names I Have Used (Maiden, alias', legal name change, etc.): _____

DL#: _____ State: _____ Soc. Sec. #: _____ - _____ - _____

Previous Addresses in past 7 years:

1) _____
2) _____

I, the undersigned, have completed a State of Texas Approved Child Protection Training Course and have correctly answered at least 80% of the questions on the final exam. Furthermore, while I am on the BCBA property, I will be able to present the proper documentation proving that I have satisfactorily completed this course upon request. By my signature, I affirm, that all information on this form is true and accurate.

Have you ever been convicted of a felony or misdemeanor? Yes No (click one). If "Yes", explain: (on the back)

I hereby authorize (your church/organization) _____ to obtain information about me from various law enforcement agencies, courts and corrections agencies. This authorization shall continue to be effective until revoked by me. A photocopy or facsimile of this consent shall be as effective as the original.

SPONSOR APPLICANT'S SIGNATURE: X _____

Be Sure Your Church/Organizational Leader Signs Below Before This Form is Mailed:

I, the undersigned, have performed a **Criminal Background Check and Child Abuse Registry Check** on the above BCBA Sponsor Applicant and have found no felony or sexual offense convictions listed. I understand that these Background Checks do not need to be turned into the BCBA Camp Office. However, these Background Checks will be brought to the campgrounds and will be readily available upon request.

CHURCH LEADERSHIP SIGNATURE: X _____

FINAL INSTRUCTIONS

Congratulations. You have finished your BCBA Application.

NOTE: CAMPER REGISTRATION IS NOT COMPLETE UNTIL:

- 1) You print **these** documents.
- 2) You read (or understand) the 2012 BCBA Policies and Procedures.
- 3) You sign and acquire all the requested signatures on **these** documents.
- 4) You pay the required deposit (online or by enclosing a check).
- 5) And you have mailed these documents (and deposit check if applicable) to:

BCBA
P.O. BOX 248
Lueders, Texas 79533

We look forward to your stay with a great deal of excitement. We hope and pray that you will come to BCBA expecting clear direction for your life from our Lord Jesus Christ during your stay.