

PLEASE PRINT

LAST NAME _____ FIRST NAME _____ M.I. _____

MALE FEMALE ENTERING GRADE _____ BIRTHDATE ____/____/____ AGE AT CAMP _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Predominant Cultural Background: Requested by US government for statistical purposes; not to be used in a discriminatory manner. Response is voluntary. Please check: African Am (Non-Hisp) Am Indian/Native Alaskan Asian Caucasian Hispanic/Latino Native Hawaiian/Pacific Isl Non-Res Alien

CABIN PARTNER: Use this area if you wish to request a cabin partner from another church. SLSC will try to honor your request, but cannot guarantee it.

Name(s): _____ From (Church City & Name): _____

To be completed by PARENT/GUARDIAN

PARENT/GUARDIAN I

LAST NAME _____

FIRST NAME _____

PRIMARY PHONE _____

OTHER _____

EMAIL _____

PARENT/GUARDIAN 2

LAST NAME _____

FIRST NAME _____

PRIMARY PHONE _____

OTHER _____

EMAIL _____

Your child will be released only to parents or to the designated adult from your church unless you instruct otherwise in writing. Is there anyone to whom we should NOT release your child? Complete name(s): _____

PARENTAL AUTHORIZATION:

I certify that I have read the parent/camper information pages attached to this registration.

INFORMED CONSENT AND HOLD HARMLESS/RELEASE AGREEMENT: I acknowledge that participating in Spencer Lake Summer Camp involves a certain degree of risk. I also understand that participation in activities is entirely voluntary and requires participants to abide by applicable rules and standards of conduct.

In case of an emergency involving myself/my child, I understand that every effort will be made to contact the individual listed as the emergency contact person. In the event that this person cannot be reached, permission is hereby given to the medical provider selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication. Medical providers are authorized to disclose protected health information to the adult in charge, camp medical staff, camp management, and/or any physician or health care provider involved in providing medical care to the participant.

I have carefully considered the risk involved to myself/my child and give consent for my child to participate in these activities. I approve sharing information on this form with Spencer Lake Summer Camp volunteers and professionals who need to know of medical situations that might require special consideration for safely conducting activities.

I release Spencer Lake Summer Camp, Wisconsin/Northern Michigan Ministries Network, Spencer Lake Christian Center, activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation.

I also hereby give permission to the *camp counselor and/or other member of the camp staff to inspect the contents of any or all of my child's personal belongings, and to withhold and/or dispose of any improper or illegal contents. I understand that if my child misbehaves and violates the camp rules, I may be called to pick him/her up. *Camp counselor refers to "a person in charge of a group of children at camp: and does not imply the individual is licensed to give counsel.

TALENT RELEASE AGREEMENT: I hereby assign and grant to Spencer Lake Summer Camp, Wisconsin/Northern Michigan Ministries Network and Spencer Lake Christian Center the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recordings made of myself/my child at all Spencer Lake Summer Camp activities, and I hereby release Girls Ministries of Wisconsin/Northern Michigan Ministries Network, Spencer Lake Christian Center, activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all liability from such use and publication.

I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/film/videotapes/electronic representations and/or sound recordings without limitation at the discretion of the Girls Ministries and the Wisconsin/Northern Michigan Ministries Network and Spencer Lake Christian Center and I specifically waive any right to any compensation I or my child may have for any of the foregoing.

I understand that if any information I have provided is found to be inaccurate it may limit and/or eliminate the opportunity for participation in any event or activity.

A photocopy or facsimile of this authorization shall be as valid as the original.

I agree with all the statements made above.

Parent/Guardian Name [PRINT] _____

PARENT/GUARDIAN SIGNATURE:

DATE _____

Check your week of SPENCER LAKE SUMMER CAMP

- 1 Sr Hi, July 11-15 - Gr 9-12 4 Sr/Jr Hi, Aug 1-5 - Gr 6-12
Must be postmarked/faxed by JUNE 24 Must be postmarked/faxed by JULY 15
- 2 Sr/Jr Hi, July 18-22 - Gr 6-12 5 Kids Camp 1, Aug 8-12 - Gr 3-6
Must be postmarked/faxed by JULY 1 Must be postmarked/faxed by JULY 22
- 3 Jr Hi, July 25-29 - Gr 6-8 6 Kids Camp 2, Aug 15-19 - Gr 3-6
Must be postmarked/faxed by JULY 8 Must be postmarked/faxed by JULY 29

DEPOSIT (NON-REFUNDABLE, NON-TRANSFERABLE)	\$ 40.00
Balance of REGISTRATION FEE	161.00
SUB-TOTAL Before Additions Below	\$ 201.00
Deposit to CAMP BANK [SPENDING MONEY]	\$ _____
Camp Shirt—\$12.00 [CHECK SIZE]	\$ _____
ADULT: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL <input type="checkbox"/> 3XL	
YOUTH: <input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL	
<input type="checkbox"/> Video Download of the Camp Week—\$5.00	\$ _____
<input type="checkbox"/> LATE Registration—\$20.00 (Postmarked/faxed after date listed above for your camp.)	\$ _____
<input type="checkbox"/> WALK-ON Fee—\$10.00 (SLSC must be notified by fax or email of last-minute campers BEFORE NOON on the Friday prior to start of camp or a walk-on fee will be charged.)	\$ _____
SUB-TOTAL	\$ _____
PAYMENT [Minimum \$40 Deposit]	\$ - _____
BALANCE DUE	\$ _____
NOTE: Checks to be made to WNMD.	

**Complete this section if registering as a church group.
CAMP COORDINATOR**

REGISTERING THROUGH:

CHURCH/GROUP CITY: _____

CHURCH/GROUP NAME: _____

ENCLOSED: \$ _____ Church Check Pers Check Cash

CAMP COORDINATOR SIGNATURE:

I have read the parent/camper information and will abide by all camp rules.

CAMPER SIGNATURE _____

PLEASE PRINT
 CAMPER LAST NAME _____ FIRST NAME _____ M.I. _____ DATE OF BIRTH _____

HEALTH HISTORY

*Attach a separate page with more details if necessary.

NO CHRONIC HEALTH ISSUES

Date of Last Tetanus _____ Immunizations Current? Yes No

Seizures Headaches Diabetes Fainting Bleeding Heart Trouble Asthma

Other _____

Explanation: _____

ALLERGIES

NO KNOWN ALLERGIES

Hay Fever _____

Bee Stings _____

Plants _____

Foods _____

Allergies to Medications: _____

Other: _____

DIET/ACTIVITY

NO DIET/ACTIVITY RESTRICTION.

Explain: _____

MEDICATIONS

Yes No My child may be given Tylenol, Iburprofen, Benadryl and/or antacids as deemed necessary.

NOT ON ANY MEDICATIONS.

List all medications being brought to camp—continue on separate page if necessary.

All meds must be original container/label with patient name, physician name, medication name, prescription number, date prescribed, dosage.

Medication	Dosage/Time	Reason

EMERGENCY CONTACT

In case of emergency, SLSC will first attempt to contact parent/guardians. If they cannot be reached the camp will call person listed below.

Name _____

Primary Phone _____

Other Phone _____

Relationship to Child _____

INSURANCE

Camp insurance is accident-only coverage and is secondary to personal insurance.

DO NOT HAVE INSURANCE.

Insurance Co. _____

Ins Phone _____

Policyholder Name _____

Group # _____

FAMILY PHYSICIAN

Name _____

Phone _____

PARENT AND CAMPER INFORMATION

2016 SPENCER LAKE SUMMER CAMP

REGISTRATION OPENS: APRIL 1

REGISTER ONLINE AT WWW.CAMP.STUDENTMIN.COM OR WWW.WNMDKIDS.ORG > KIDMIN > KIDS CAMP - OR - THROUGH YOUR CHURCH/GROUP CAMP COORDINATOR
 MORE INFO: YOUTH CAMPS—ROBYN@STUDENTMIN.COM 715.258.8643 KIDS CAMPS—DORIS@WNMDAG.ORG 715.258.8118

CAMP DATES

- 1 Sr Hi, July 11-15 - Gr 9-12
Must be postmarked/faxed by JUNE 24
- 2 Sr/Jr Hi, July 18-22 - Gr 6-12
Must be postmarked/faxed by JULY 1
- 3 Jr Hi, July 25-29 - Gr 6-8
Must be postmarked/faxed by JULY 8
- 4 Sr/Jr Hi, Aug 1-5 - Gr 6-12
Must be postmarked/faxed by JULY 15
- 5 Kids Camp 1, Aug 8-12 - Gr 3-6
Must be postmarked/faxed by JULY 22
- 6 Kids Camp 2, Aug 15-19 - Gr 3-6
Must be postmarked/faxed by JULY 29

Register according to grade student will enter in the fall. First-year campers must be 8 yrs old.

REGISTRATION FEES

DEPOSIT (NON-REFUNDABLE, NON-TRANSFERABLE)	\$	40.00
Balance of REGISTRATION FEE	+	161.00
Total Registration Fee (before additions below)		\$201.00

Camp Shirt	+	\$	12.00
Video Download of Camp Week	+	\$	5.00
Late Registration [Mailed/emailed faxed after date indicated above.]	+	\$	20.00
Walk-On Registration	+	\$	10.00

(SLSC must be notified of last-minute campers before noon on the Friday prior to start of camp or the walk-on fee will be charged.)

Online Registration

Link to online registration at: www.camp.studentmin.com - or - www.wnmdkids.org
 Spending Money: May be pre-paid through online registration or students may "deposit" cash upon arrival.

Credit Card Payments: Only accepted through online registration. Balances due may be paid through your church/group coordinator or by check or cash upon arrival.

Paying By Check: All checks to be made out to "WNMID."

Cancellations & Refunds: We happily process refunds for cancelled registrations, minus the non-refundable deposit no later than 15 days following the close of summer camps.

ALL CAMPS IN SESSION FROM MONDAY AM THROUGH FRIDAY NOON.

DROP OFF: Check-in takes place at the camp office, across from the Retreat Center. The office opens at 8:30 am on Monday. All counselors and campers must be on grounds by 10:00 am.

PICK UP: Camp closes following Friday lunch between 12:00-1:00 pm. Campers must check out with their counselor before leaving the grounds.

LOCATION & PHONE: Spencer Lake Christian Center is 5 m. south of Waupaca, WI, on Cty Hwy E. On Google maps search *Spencer Lake Christian Center*.

FOR GPS ONLY: N1401 Cedar Lane - Waupaca - WI THIS IS NOT A MAILING ADDRESS

GENERAL CAMP INFO: 715-258-8643 DURING CAMP WEEKS ONLY: 715-258-6850

DRESS POLICY: All campers are expected to dress modestly.

- Modest one-piece swimsuit required for girls or swimshirt covering.
- No spaghetti straps or plunging necklines.
- No hats or t-shirts with inappropriate imprints—i.e., alcohol/tobacco.
- Shorts and skirts should be finger-tip length or longer.

PACKING LIST

- | | |
|---|---|
| <input type="checkbox"/> Sleeping bag or bedding & pillow | <input type="checkbox"/> Tennis shoes for recreation |
| <input type="checkbox"/> Bath towels & wash cloth | <input type="checkbox"/> Rain poncho |
| <input type="checkbox"/> Pajamas | <input type="checkbox"/> Sweatshirt or jacket |
| <input type="checkbox"/> Jeans, modest shorts & shirts | <input type="checkbox"/> Extra pair of shoes |
| <input type="checkbox"/> Modest one-piece swimsuit | <input type="checkbox"/> Plastic bag for wet/dirty clothes |
| <input type="checkbox"/> Beach towel | <input type="checkbox"/> Flashlight |
| <input type="checkbox"/> Socks & underwear | <input type="checkbox"/> Bible |
| <input type="checkbox"/> Bodywash-shampoo-toothbrush, toothpaste, deodorant, etc. | <input type="checkbox"/> Notebook and pen |
| <input type="checkbox"/> Hand soap | <input type="checkbox"/> Spending money |
| | <input type="checkbox"/> Medications and prescription information for nurse—see note below. |

DO NOT BRING: Absolutely no fireworks, firearms, slink bombs, tobacco, weapons, alcohol, drugs, pets, or hair color spray (due to air conditioner damage).



MEDICATIONS: Bring in original container/label in a plastic zip bag to the Nurse's Station upon arrival. Include: 1) camper name, 2) doctor name, 3) prescription number, 4) date prescribed, 5) medication name, 6) dosing. All meds go to camp nurse upon arrival. It is campers responsibility to go to the nurse for meds at prescribed times.

Changes in health and medication info must be mailed in with parent signature or provided at check-in.

MEALS: Meals are served at the Dining Hall. A full salad bar is available at noon and evening meals. If your child deals with food allergies, a menu is available upon request. Parents can help him/her identify good choices and send along other items to supplement. The Snack Stand also has hamburgers, hot dogs, ice cream and other snacks available for purchase.

MAIL CALL: Campers love mail—send it early! See instructions below. Note that letters should be addressed differently than packages:

John Smith (CAMPER NAME)
SLSC—Junior High (CAMP SESSION)
 INSERT APPROPRIATE ADDRESS—BELOW

LETTERS: PO Box 309 Waupaca, WI 54981
 **PACKAGES:** N1385 Cty Hwy E Waupaca, WI 54981


ONE-WAY EMAIL PLAN: See Bunk1 info on next page. Note: This is a pay-per-message service. There is a one-day delay in receiving messages, i.e. messages sent on Monday are received on Tuesday.



CAMP RULES

1. Show consideration for others.
2. Attendance at classes, chapel, and evening service is required
3. Room and grounds must be kept clean. Campers are responsible to pay for damage to their room. Should an offender not be found, all roommates will be charged equally.
4. Robe or large towel must be worn to and from the beach. Shoes and shirts must be worn in dining hall and snack stand.
5. Clean clothing is to be worn to the evening service.
6. Campers must be in bed and quiet by "lights out".
7. All clothing must be modest. See "Dress Policy."
8. Campers are not to enter another cabin without counselor's permission. Boys never allowed in girls rooms; girls never allowed in boys rooms.

Parents—please review these rules with campers. Lack of cooperation, unnecessary roughness, lack of respect for property, or an unwholesome attitude on the part of any camper will result in expulsion from camp. Parents bear responsibility and expense of transportation home.

HOUSING: Housing assignments are not released prior to check-in. Campers supply their own towels, soap and sleeping bag or bed linens. Cabin partner requests should be made at the time of registration.

ROLLERBLADES: Must be checked in/out at Sports Room or office and are not allowed inside any other building. Rollerblades not to be used beyond Game Room. Rules Violation: Equipment is taken for remainder of week.

SPENDING MONEY: The Snack Stand is open during free time and souvenirs are sold in the camp office. We recommend campers deposit their spending money in the camp bank for safekeeping.

VISITS: We recommend parents refrain from visiting or calling during camp. Experience has shown that this often promotes homesickness for your child and others. Camps are not open to the general public, including evening services. Only registered campers & staff are allowed on grounds. For necessary visits, please call first.

LOST & FOUND: SLSC is not responsible for lost or stolen articles. It is the camper's responsibility to check in the office for lost items. We strongly discourage bringing items of value, cell phones, other electronic devices, sports equipment, sentimental items, etc. Shipping will be charged for returned items. Lost and found is kept for one month.

INSURANCE: Registered campers are insured for injury incurred at camp, secondary to personal insurance. Camp insurance pays the additional eligible medical expenses, up to maximum benefits, after benefits from other policies are exhausted. Illness at camp is not a covered expense.

NON-DISCRIMINATION POLICY: It is the policy of SPENCER LAKE SUMMER CAMP to admit all persons without regard to race, color, national origin, sex, age, or handicap. The same requirements for admission are applied to all persons without regard to race, color, national origin, sex, age, or handicap. There is no distinction in eligibility for or in the manner of providing services by this agency. All facilities of the agency are available regardless of race, color, national origin, sex, age, or handicap. All persons and organizations that have occasion either to refer people for admission or recommend this agency are advised to do so without regard to race, color, national origin, sex, age, or handicap.



BUNK1

STAY IN TOUCH THIS SUMMER WITH BUNK NOTES

We are excited to tell you about our continued partnership with Bunk1, allowing you to send "Bunk Notes" throughout the summer. Using a secure login, you'll be able to send a "Bunk Note" to your camper at any time of the day and it will be delivered with the regular mail the very next day. No need to wait for USPS to deliver

- Bunk1 makes it easy to communicate with your child!

GET STARTED TODAY!

RETURNING PARENTS

- Go to www.bunk1.com
- Enter your email address and password in the space provided.

NOTE:

- You are logging into the same account that you used last year. If you have forgotten your summer password, click "[Need to reset your password?](#)" You will be prompted to enter your email address and will be sent a link to reset your password. If you do not receive an email, please also check your spam folder.

NEW PARENTS

- Go to www.bunk1.com
- Click the link for "[Need an Account or have an invitation code](#)"
- Complete the basic form to create your account. You will be asked to enter an "Invitation Code". Please use the following code: **B1SPENCER**

NOTE:

- For your camper's safety, please do not share the invitation codes above.

SENDING BUNK NOTES

Step 1: Purchase a "Family Bundle" or "Bunk Note Credits". A Bunk Note Credit costs \$1 and packages of various sizes are available.

You have the option to enhance your Bunk Note by attaching photos, adding baseball box scores, Sudoku Puzzles, borders, or twitter feeds. Please note that adding these features will utilize additional credits.

Step 2: Send your note. Select your camper's name and the correct cabin, type in your message, then hit the "Send Bunk Note" button. Every 24 hours, camp will receive a pre-sorted PDF of all the sent Bunk Notes.

FREQUENTLY ASKED QUESTIONS:

Can other relatives use these services?

Absolutely! As soon as you login, you will notice a button under the heading "Quick Links" to "Invite Family Members". Click that button, enter their details and they will be sent an email. PLEASE NOTE: this will prompt them to set up their own account. It does not provide them access to your account OR your Bunk Note Credits.

Accessing Bunk1 from a mobile device?

The Bunk1 website is mobile optimized. For your convenience, add our Bunk1 icon to your iPhone home screen. To do so, open Safari, go to www.bunk1.com, then tap the "Share" button (blue square with an arrow pointing upward on the toolbar). Tap "Add to Home Screen" and Bunk1 will be as accessible as your native app!

Questions or Problems? Please call Bunk1 at 1-800-216-9472 or email support@bunk1.com

Google Chrome is the preferred web browser for using the Bunk1 System. You can download Google Chrome for free by visiting: www.google.com/intl/en/chrome/browser/.

