

All forms available online at: www.ilsmonline.com

Please use this information as a guide as you plan for 2015 Breakaway Camps.

needs for the camp coordinator:

- church reservation form (to be completed by April 1, 2015)
- complete church packet (print or down load all your documents)
- camp promo videos- available on vimeo.com/ilsmonline
- camp coordinator checklist
to help you prepare your group for the best camp experience in 2015
- financial breakdown sheet
to complete and return with all camper/counselor/support staff applications
- group housing form
to complete for all students & staff from your church/group
ISM will need all forms completed before staff approval
- early postmark deadline- May 1, 2015

needs for the camper:

- camper application
- camper policies & expectations

needs for the counselor/staff:

- counselor/staff application
- 2 references (personal & sr. pastor)
- counselor manual & test
information regarding counselor/staff policies, camp policies and
procedures and required training information

New for 2015:

Group Registration Form submitted online by April 1st.
Counselor/Staff Administrative fee is \$35.

QUESTIONS?
217-854-4631 or ilsmonline.com

FEBRUARY

_ Camp information available online for download at www.ilsmonline.com

Mark the following deadlines on your personal calendar:

April 1: Reservation Form submitted online.

May 1: Breakaway Kids Early Registration postmark deadline.

May 21: Regular Registration deadline.

_ Decide who will help facilitate the registration of your students for camp.

_ Familiarize yourself with all camp forms and policies.

_ Set your own church registration deadline to insure all counselor/staff applications & camper applications are mailed with the postmark date of MAY 1, 2015. A recommended church deadline date would be APRIL 22, 2015.

_ Decide which camp you are planning to attend. Brainstorm fundraising ideas to help students attend. Set a registration goal for Express Line!

_ Find out if there are scholarships available from your church or church family.

_ Generate payment plan for parents.

_ Begin making copies of all camp forms and applications for distribution. Make sure to include deadlines in any materials you distribute to parents, counselors and/or staff.

MARCH

_ Prep for a counselor/staff and parent meeting to go over registration information and all camp forms and policies.

_ Make sure to include deadline dates in any materials you distribute to parents, counselors and/or staff.

_ Begin promoting camp to your students. Camp videos are available for download on our website. Camp posters will be mailed to the church.

_ Make sure they know applicable deadlines, camp costs and any transportation/meal costs that need to be included by your church. Encourage students/staff to begin fundraising.

_ Begin to actively recruit counselors/staff. For grades 1-2 students are housed by the ratio of 8 campers/ 2 counselors and for grades 3-6 students are housed 9 campers/ 1 counselor. If you are sending 5 students or less from your church, no leader is required.

_ Distribute counselor/staff applications to persons you've recruited. Encourage them to complete their applications and return them to you in a timely fashion with the training test. Postmark deadline for counselor/staff applications is MAY 1, 2015.

_ Submit a number estimate of interested students by completing the online Group Reservation Form by April 1, 2015.

APRIL

_ Complete the online Group Registration Form by April 1, 2015 with an estimated number of campers/staff.

EARLY REGISTRATION DEADLINE:: 05-01-15

FOR CAMPERS:

_ Collect all camper applications and payments. Verify that each application is filled out completely and total payment has been given to your church. IMPORTANT:: REMEMBER TO MARK T-SHIRT SIZES AND FILL IN SIZES ON THE FINANCIAL BREAK-DOWN SHEET. In order to receive t-shirts, orders must be postmarked by May 21st.

_ Complete the financial breakdown sheet according to camper applications that you have received.

_ Complete housing forms on how you would like your students roomed. Please know that each room will be filled to the capacity due to the large attendance of our camps. 9/1 ratio for 3-6 graders and 8/2 ratio for 1-2 grades. There are no guarantees on housing.

_ Plan on being at registration in "EXPRESS LINE". EXPRESS LINE is for ALL church group/individuals that are "PAID IN FULL" with "NO CHANGES"!

_ Mail the following completed items: all camper applications, financial breakdown form(s), housing form(s), along with a church check made payable to ISM.

FOR COUNSELORS:

- _Remind counselors/staff to read the camp training manual and to take the test. Collect test and send in with applications.
- _Collect all counselor/staff applications and verify that each application is filled out completely. Along with application, collect payment of a non-refundable administrative fee of \$35 (t-shirt included). ISM will run background checks on all applications. Please include counselor/staff t-shirt sizes on applications and financial breakdown sheet.
- _Arrange to have all counselor/staff references completed by your senior pastor. Please collect these and mail with your applications.
- _Continue promoting camp to your students.
- _Secure all transportation needs for your students. ISM is not responsible for transporting campers to and from camp.
- _Put in a check request to your church for the total amount due to ISM for counselor processing fees (non-refundable), camper fees & mail applications and monies to ISM, PO Box 620, Carlinville, IL 62626. Please DO NOT include cash or personal checks.

MAY

- _Postmark all registrations to ISM by MAY 1st to receive the early-registration price of \$199 per student.
- _Watch for billing reports faxed/emailed to the church/camp coordinator with the total amount due 10 days before the start of camp. Have any camp balance monies ready at registration.

JUNE

- 06-04-15: Last day to submit refund request form for Kids Breakaway 1
- 06-11-15: Last day to submit refund request form for Kids Breakaway 2
- _Any campers deciding to fill out an application for Kids Breakaway after May 21, 2015 will be considered an onsite registrant and there will be NO housing guarantees and an additional \$25 late fee (\$250).
- _Remind leadership and students that ISM summer camps are CLOSED camps and anyone not registered and confirmed as camp/counselor/staff will be asked to leave the grounds.

WEEK OF JUNE 15

- 06-11-15: Last day to submit refund request form for Kids Breakaway 2
- 06-15-15: First day of Kids Breakaway 1. Registration begins at 10 am. Have final payment ready at registration. LWCC Dining Hall is open until 1:30pm on Day 1 for lunch @ \$4 per person.
- Student orientation begins at 2pm on Monday.
- 06-19-15:: Last day of Kids Breakaway 1. Camp check out is 11am Friday

WEEK OF JUNE 22

- 06-22-15: First day of Kids Breakaway 2. Registration begins at 10am. Have final payment ready at registration.
- LWCC Dining Hall is open until 1:30pm on Day 1 for lunch @ \$4 per person
- Student orientation begins at 2pm on Monday.
- 06-26-15:: Last day of Kids Breakaway 2. Camp check out is 11am Friday.

Breakaway Kids Camp Breakdown Sheet

Please fill out this form **COMPLETELY** and send it along with
ALL camper & counselor/ staff & housing forms.

Make checks payable|| ISM, PO Box 620, Carlinville, IL 62626

Step 1 || CONTACT INFORMATION (please print)

Church City	Camp Coordinator
Church Name	Camp Coordinator Phone #
Church Phone #	Camp Coordinator Email
Church Fax #	
Church Email	

STEP 2|| CHOOSE CAMP

☐

BREAKAWAY KIDS
Week 1 || June 15-19

☐

BREAKAWAY KIDS
Week 2 || June 22-26

STEP 3|| PRE-REGISTRATION PAYMENTS (postmarked BY May 1, 2015)

Students paying deposit @ \$100	#	X \$100 =	
Students paying in full @ \$199	#	X \$199 =	
Paying Counselors/ Support Staff @ \$35 (T-shirt incl.)	#	X \$35 =	
T-shirts @\$5 (s-xl) or \$7 (2xl-3xl)	#	X \$5 or \$7 =	
DVD's @ \$10	#	X \$10 =	
High Ropes @ \$20 (3-5 grade ONLY)	#	X \$20 =	
Discounts	#	X =	
GRAND TOTAL			

STEP 4|| PRE-REGISTRATION PAYMENTS (postmarked AFTER May 1, 2015)

Students paying deposit @ \$100	#	X \$100 =	
Students paying in full @ \$225	#	X \$225 =	
Paying Counselors/ Support Staff @ \$35 (T-shirt Incl.)	#	X \$35 =	
T-shirts @\$5(s-xl) or \$7 (2xl-3xl)	#	X \$5 or \$7 =	
DVD's @ \$10	#	X \$10 =	
High Ropes @ \$20 (3-5 grade ONLY)	#	X \$20 =	
Discounts	#	X =	
GRAND TOTAL			

STEP 5|| PRE-REGISTRATION PAYMENTS (postmarked AFTER May 21, 2015)

Students paying in full @ \$250	#	X \$250 =	
Paying Counselors/ Support Staff @ \$35	#	X \$35 =	
DVD's @ \$10	#	X \$10 =	
High Ropes @ \$20(3-5 grade ONLY)	#	X \$20 =	
Discounts	#	X =	
T-shirts unavailable at this time for pre-order, but will be available at camp for \$10.			
GRAND TOTAL			

STEP 6 || List each camp & counselor/staff person individually with payment instruction. This total should match the total amount on page 1. (Please make copies of this form as needed for additional students.)

	Name	Deposit (\$100)	Full Reg. (\$199) by 5/1	Full Reg. (\$225) After 5/1	Onsite Reg (\$250) After 5/21	High Ropes (\$20) 3-6 grade only	Counselor/ Support Staff (\$35)	DVD (\$10)	T-Shirt (\$5-\$7) until 5/21	T-Shirt Size	Total
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
21											
22											
23											
24											
25											
	Column Totals										

AMOUNT || \$ _____ CHECK # || _____

3-6 Kids Breakaway Camp

Group Housing Form- Postmark Deadline- May 1, 2015

For Kids who have COMPLETED Grades 3 through 6

Please Print

List how you would like your group to be roomed, including name of counselor(s). Understand a group of children requesting a counselor does not guarantee that counselor's acceptance. Ratio is every 9 campers/1 counselor. Use the back side to list support staff workers/counselors not listed on this form. You may copy this form if necessary.

Check week attending

☐ Week 1- June 15-19

☐ Week 2- June 22-26

Church Name _____

Date _____

Church City _____

Phone _____

Camp Coordinator _____

I prefer to have billing/housing info sent by:

☐ Fax: _____

☐ Email: _____

Room #1

Indicate if the majority of campers are in 3rd-4th or 5th-6th grades

☐ 3rd- 4th Grade

☐ 5th-6th Grade

☐ Boys Room

☐ Girls Room

Counselor#1 _____

Camper#1 _____

Camper#2 _____

Camper#3 _____

Camper#4 _____

Camper#5 _____

Camper#6 _____

Camper#7 _____

Camper#8 _____

Camper#9 _____

Room #3

Indicate if the majority of campers are in 3rd-4th or 5th-6th grades

☐ 3rd- 4th Grade

☐ 5th-6th Grade

☐ Boys Room

☐ Girls Room

Counselor#1 _____

Camper#1 _____

Camper#2 _____

Camper#3 _____

Camper#4 _____

Camper#5 _____

Camper#6 _____

Camper#7 _____

Camper#8 _____

Camper#9 _____

Room #2

Indicate if the majority of campers are in 3rd-4th or 5th-6th grades

☐ 3rd- 4th Grade

☐ 5th-6th Grade

☐ Boys Room

☐ Girls Room

Counselor#1 _____

Camper#1 _____

Camper#2 _____

Camper#3 _____

Camper#4 _____

Camper#5 _____

Camper#6 _____

Camper#7 _____

Camper#8 _____

Camper#9 _____

Room #4

Indicate if the majority of campers are in 3rd-4th or 5th-6th grades

☐ 3rd- 4th Grade

☐ 5th-6th Grade

☐ Boys Room

☐ Girls Room

Counselor#1 _____

Camper#1 _____

Camper#2 _____

Camper#3 _____

Camper#4 _____

Camper#5 _____

Camper#6 _____

Camper#7 _____

Camper#8 _____

Camper#9 _____

Support Staff List
3-6 Kids Breakaway Camp

List all support staff and counselors not listed on the Group Housing Form
(GHF)

Church name_____

Church city _____

Male Support Staff Age

Female Support Staff Age

Male Counselor not on GHF Age

Female Counselor not on GHF Age

1-2 Kids Breakaway Camp
Group Housing Form- Postmark Deadline- May 1, 2015
For Kids who have COMPLETED Grades 1 or 2
ONLY full weeks provided
Please Print

List how you would like your group to be roomed, including name of counselor(s). Understand a group of children requesting a counselor does not guarantee that counselor's acceptance. Use the back side to list support staff workers/counselors not listed on this form. You may copy this form if necessary. Ratio is for every 4 students/1 counselor must be provided.

Check week attending

☐ Week 1- June 15-19

☐ Week 2- June 22-26

Church Name _____

Date _____

Church City _____

Phone _____

Camp Coordinator _____

I prefer to have billing/housing info sent by:

☐ Fax: _____

☐ Email: _____

Room #1

☐ Boys Room

☐ Girls Room

Counselor#1 _____

Counselor#2 _____

Camper#1 _____

Camper#2 _____

Camper#3 _____

Camper#4 _____

Camper#5 _____

Camper#6 _____

Camper#7 _____

Camper#8 _____

Room #3

☐ Boys Room

☐ Girls Room

Counselor#1 _____

Counselor#2 _____

Camper#1 _____

Camper#2 _____

Camper#3 _____

Camper#4 _____

Camper#5 _____

Camper#6 _____

Camper#7 _____

Camper#8 _____

Room #2

☐ Boys Room

☐ Girls Room

Counselor#1 _____

Counselor#2 _____

Camper#1 _____

Camper#2 _____

Camper#3 _____

Camper#4 _____

Camper#5 _____

Camper#6 _____

Camper#7 _____

Camper#8 _____

Room #4

☐ Boys Room

☐ Girls Room

Counselor#1 _____

Counselor#2 _____

Camper#1 _____

Camper#2 _____

Camper#3 _____

Camper#4 _____

Camper#5 _____

Camper#6 _____

Camper#7 _____

Camper#8 _____

Support Staff List
1-2 Kids Breakaway Camp

List all support staff and counselors not listed on the Group Housing Form
(GHF)

Church name_____

Church city _____

Male Support Staff Age

Male Counselor not on GHF Age

Female Support Staff Age

Female Counselor not on GHF Age

2015
Breakaway Kids
Counselor/Staff Application

Breakaway Kids Counselor/Staff Application

****COUNSELOR FEES ARE NON-REFUNDABLE****

Please Mail by May 1, 2015 - Administrative Fee: \$35

please contact ISM at ilsmonline@idcag.org or 217-854-4631 with questions or for more information

AGE REQUIREMENT

All support staff should be at least 15 years of age and all counselors should be at least 18 years of age at the beginning of the camp season to participate in Illinois District Summer camps. Support staff and extra counselors will be selected based upon the needs of the camp. No position is guaranteed.

CHURCH COUNSELOR/STAFF POLICY...

Due to the large number of campers that attend Illinois Student Camps every summer, all churches are expected to provide counselors and support staff in proportion to the students they intend to send. The room ratio for grades 1-2 is for every 8 campers/ 2 counselors required. The room ratio for grades 3-6 is for every 9 students/ 1 counselor is required. Each church should provide 1 male/female counselor if sending 6 or more students. If your church is send 5 students or less, a counselor is not required and ISM will fill the counselor position for your students by placing students with another church family.

REQUIREMENTS & TRAINING...

- 1) All staff must fill out an application to participate in any ISM summer camp. This includes all administrative staff, counselors, special guests, support staff, and interns.
- 2) All staff must submit a pastoral reference and one other reference to participate in camps.
- 3) All staff must submit to a national background check to be kept on file with ISM Camps.
- 4) All staff must read manual and have a completed test on file with ISM Camps.
- 5) All counselor fees are non refundable.
- 6) ALL STAFF will be personally responsible for room keys given to them on registration day. If lost, a \$10.00 room key charge will incur.
- 7) Make sure your t-shirt size and payment is included with your group's financial breakdown sheet.
- 8) ISM is not responsible to provide bedding or towels, however IF ANY STAFF forget their bedding or towels, you may go directly to the Activity Center and rent a bundle for \$10 (which includes 1-sheet, blanket, pillow, towel & wash cloth). LWCC will not bill for this service. It must be paid at the time of rental.

WHAT TO BRING...

Bedding (a sleeping bag, or twin sheets & a blanket, pillow), sunscreen, bug spray, towels, washcloths, toiletries, alarm clock, bible, modest clothing (which includes modest swimwear [no bikinis], no spaghetti straps, no short skirts, short shorts or leggings worn as pants), casual clothing for services, sandals, comfortable walking shoes, air fresheners, team supplies, money for bgmc offering, snack and camp store.

PLEASE MAIL COMPLETED APPLICATIONS TO . . .

Illinois Student Camps, c/o Illinois Student Ministries, PO Box 620, Carlinville, IL 62626 along with your authorization form, processing fee of \$35 and supporting documents by May 1, 2015. Please DO NOT send cash or personal checks. Cashier Check, Money Order or Church Checks accepted.

ALL staff must complete ALL pages of this application in their entirety before returning to ISM. Incomplete applications will incur a delay in processing and may result in a staff members inability to serve at ISM summer camps. Completing this application does NOT guarantee placement at IL Student Camps as either staff or counselor. All staff will be notified of their placement prior to camp.

step 3: Please complete the background investigation consent - this section MUST be signed

ISM requires any adult on grounds during il summer camps have a national background check on file with our offices.

I, _____ hereby authorize Illinois Student Ministries/and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal or police records, including those maintained by both public and private organizations and all public records for confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for volunteering for counselor/staff at the Illinois Summer Camps.

I release Illinois Student Ministries and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

The information submitted in step two of this form is my true and legal name and all information is true and correct to the best of my knowledge.

Date ____/____/____ Signature_____

step 4: Please complete the medical and media release - this section MUST be signed

no counselor or staff will be accepted without a signature.

I do hereby state that while I am a registered staff member at any Illinois Assemblies of God summer camp, I hereby authorize any director, counselor, nurse, dean, lifeguard, or other responsible person of said Camp to consent to any x-ray, examination, anesthetic, medical or surgical treatment, and hospital care, to be rendered under the general or special supervision and on the advice of any physician or surgeon licensed to practice in the United States, when such medical or surgical treatment is necessary. I give full permission to Illinois District Assemblies of God summer camps to reproduce any photograph and/or video image of me for promotional usage without obligation to me. I have read the rules and agree to abide by them.

Date ____/____/____ Signature_____

step 5: Please complete the counselor and staff preparation questions

- 1) I am willing to counsel or work support staff as needed ☐ Yes ☐ No
- 2) I have past experience as an EMT or Nurse and would be willing to help in this area. ☐ Yes ☐ No
- 3) I have previously served at Illinois Youth Camps? ☐ Yes ☐ No
If yes, how many years?_____ Which years & camps?_____
- 4) I am the childrens pastor/main children's leader at my church. ☐ Yes ☐ No
- 5) I would like to be CONSIDERED for Team Captain. ☐ Yes ☐ No
- 6) I agree to read the ISM Summer Camp Counselor & Staff Training Manual and will complete the study guide. I understand, agree with, and am willing to abide by the expectations for counselors and staff set by Illinois Kids Camps. Both Manual and Study Guide can be found online at www.ilsmonline.com ☐ Yes ☐ No

step 6:

Please circle t-shirt size:

S

M

L

XL

XXL

XXXL

step 7: Please complete the spiritual status questions- this section **MUST** be signed.

CITY

Yes ☐ No ☐

Yes ☐ No ☐ I hold membership in the church named above.

Yes ☐ No ☐ I attend all services faithfully.

Yes ☐ No ☐ I am baptized in the Holy Spirit and speak in tongues regularly.

Yes ☐ No ☐ I can explain the plan of salvation and the baptism of the Holy Spirit to another individual.

Yes ☐ No ☐ I have often prayed with others in my church, especially at the altar.

Have you in the past used any illegal drugs? Yes No

If yes, how long ago? _____ Prior to salvation? Yes No

During the past ten years, have you ever been convicted of a crime, excluding traffic violations (i.e. speeding tickets)?

Yes No

If yes, please explain _____

Have you ever been involved with or convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor? Yes No If yes, please explain

step 8: Please complete the health care information

INSURANCE CARRIER

COVERAGE

COVERAGE END

INSURANCE CO PHONE NUMBER

--	--	--	--

[illegible]

INSURED'S NAME (FIRST)

(LAST)

[illegible]

INSURANCE / POLICY / OR GROUP NUMBER

[illegible]

Do you have allergies? Yes ☐ No ☐ If yes, please explain: _____

Diphtheria _____ Whooping Cough _____ Polio _____ Tetanus Toxoid _____

Measles ☐ Polio ☐ Mumps ☐ Chicken Pox ☐ Scarlet Fever ☐ Whooping Cough ☐ Other ☐

Do you have: Heart Trouble ☐ Ear Trouble ☐ Asthma ☐ Hernia ☐

Pregnancy ☐ HIV/AIDS ☐ Other ☐

Is there any activity in which you do not wish to participate? _____

Required: Height	Weight	In one word, describe your health
6'0"	150 lbs	Healthy
5'8"	140 lbs	Healthy
5'6"	130 lbs	Healthy
5'4"	120 lbs	Healthy
5'2"	110 lbs	Healthy
5'0"	100 lbs	Healthy
4'8"	90 lbs	Healthy
4'6"	80 lbs	Healthy
4'4"	70 lbs	Healthy
4'2"	60 lbs	Healthy
4'0"	50 lbs	Healthy
3'8"	40 lbs	Healthy
3'6"	30 lbs	Healthy
3'4"	20 lbs	Healthy
3'2"	10 lbs	Healthy
3'0"	0 lbs	Healthy

Within the last year, have you had problems with nervous breakdown, extreme depression, extreme anxiety, attempted suicide, or destructive temper? Yes No (please circle) If yes, please explain

Is there any information we should have regarding your welfare (handicaps, restrictions, diets, etc.)? _____

2015
Breakaway Kids
Application

Breakaway Kids Camper Application

POSTMARK DEADLINE:: May 1, 2015

parents/youth leaders: please keep this information accessible to you during your student's stay at camp.

PRE-REGISTRATION: No phone registrations, or incomplete registrations will be accepted. Cashier Checks, Money Orders, or Church Checks are accepted. Walk-ins may be accepted based on our capacity and counselor to camper ratio. All monies must be received by registration on Monday in order for a student to attend. Students or groups registering by the early registration deadline must pay the correct deposit amount to be eligible for the early registration pricing. Please see DEADLINE DATES & REGISTRATION COSTS.

PRE-REGISTERING A GROUP: Churches are asked to complete and send in a financial breakdown sheet and housing form in addition to individual camper applications at the time of submission. We ask that ONE check be submitted for a group's registration fees. Any transfer of funds between students in a group must be made via an official request form which can be obtained through our offices.

DEADLINE DATES & REGISTRATION COSTS.....	Student.....	Counselor.....
Early Registration-postmarked by May 1.....	\$199.00.....	\$35.....
Regular Registration-postmarked by May 21.....	\$225.00.....	\$35.....
Late Registration-postmarked after May 21.....	\$250.00.....	\$35.....
Highropes (optional).....	\$20.00.....	
Pre-Purchase DVD's (optional).....	\$10.00.....	

T-SHIRTS: T-shirts are available for purchase for those who registered by May 21 for \$5 or \$7 depending on size. No orders will be taken after May 21; t-shirts may be purchased at the camp store for \$10. Please list all shirt and DVD orders on your financial breakdown sheet. **PAYMENT MUST BE INCLUDED IN ORDER TO RECEIVE YOUR T-SHIRT/DVD.**

DEPOSITS: A student or group may register by making a \$100 deposit per camper. **(Deposit MUST include payment for any extras purchased: DVD, high ropes course & t-shirts, etc).** Registration must be PAID IN FULL on or before the first day of camp. No deposits will be accepted without the camper(s) applications. Please DO NOT send cash or personal checks. Cashier Check, Money Orders or Church Checks are accepted.

REFUNDS: Due to programming costs, refunds for students who are unable to attend a full week of camp must be requested a minimum of SEVEN DAYS prior to the first day of camp. Refunds must be requested via an official refund request form which can be obtained through our offices. Refunds will be issued at the end of the camping season minus a \$50 fee per student. We cannot refund monies for partial attendance to a week of camp. No refunds will be given for expelled students.

INDIVIDUAL HOUSING: ALL Students will be housed before arriving on the campgrounds. If a student is coming as an individual, but would like to be housed with a group, we will do our best to accomodate requests if it is made by MAY 1, 2015, however, NO GUARANTEES!

GROUP HOUSING: All Students will be housed before arriving on the camp grounds. Understand a group of children requesting a counselor does not guarantee that counselor's acceptance. Students grades 1-2 are housed 8 campers/2 counselors and students grades 3-6 are housed 9 campers/1 counselor. If you are sending 5 students or less from your church, no leader is required.

CAMP SCHEDULE: Registration begins the Monday of each camp at 10AM. Student orientation begins at 2PM. Please plan to bring a sack lunch or money to eat at the Lake Williamson Dining Hall (\$4.00) for Monday lunch. The first camp meal served will begin at 5PM on Monday. Camp checkout is 11AM on Friday.

NON-CAMPER POLICY: ISM summer camps are CLOSED camps. All camp activities including evening services are open only to registered campers and staff. Any child, student, or adult violating this policy will be asked to leave the grounds.

LOST AND FOUND: Any lost and found items left on grounds after the conclusion of camp will be held for two weeks. If not claimed during that time period, items will be donated. Items will be shipped back to their owners at their owner's expense.

CAMP PROPERTY DAMAGE: Charges for items broken/damaged during camp will be billed to all parties/individuals involved.

INSURANCE: Secondary medical coverage for accidental injuries is with Brotherhood Mutual Insurance.

WHAT TO BRING: Sleeping bag or twin sheets, blanket, pillow, towel, recreational clothes, & gym shoes, toiletries, modest swimwear (no bikinis), Bible, spending money is needed for bgmc offering, snacks and camp store. Please clearly label all items. Campers are responsible for personal belongings. ISM is not responsible for lost/stolen items.

WHAT NOT TO BRING: No weapons, tobacco, electric devices, laptops, video games, SILLY STRING, water guns, water balloons, sidewalk paint, tape, or spray paint products (including colored hair spray).

DRESS CODE: MODESTY. No revealing clothing will be permitted. This includes: short dresses, skirts, or shorts (4 inch inseam), leggings, plunging necklines, spaghetti straps, cutoff t-shirts (showing sport bras) or cutoff shorts, bikinis, and speedos. See more details regarding our dress code on our policies page.

EXPECTATIONS: Regulations are given as guidelines for every camper to follow. This code of conduct has been established for your students protection and the benefit of every person present. The 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. The expense of transporting the expelled camper(s) home from camp is the responsibility of the parents/guardians.

il kids summer camp application form

please complete application in its entirety before returning to ism or your church group.
incomplete applications will incur a delay in processing.

step 1: Which week will you be attending?

☐

breakaway kids
grades 1-2

week 1| june 15-19
no partial week available

☐

breakaway kids
grades 3-6

week 1| june 15-19

☐

breakaway kids
grades 1-2

week 2| june 22-26
no partial week available

☐

breakaway kids
grades 3-6

week 2| june 22-26

step 2: Camper information

FIRST

LAST NAME

MI

D.O.B. (MM, DD, YY)

AGE

SEX

GRADE (Completed)

MAILING ADDRESS

CITY

STATE

ZIP+4

AREA CODE + PHONE NUMBER

PARENT'S E-MAIL ADDRESS

NAME OF CHURCH ATTENDING

CHURCH CITY

YOUTH LEADER NAME

step 3: please designate camp payment -

Full payment or deposit of \$100 and registration must be postmarked by May 1, 2015 for early registration rate to apply. Make checks payable to Illinois Student Ministries and mail to: Illinois Student Ministries, PO Box 620, Carlinville, IL 62626. If attending with a group, please DO NOT send cash or personal checks. Cashier Check, Money Orders or Church Check accepted. If paying for a group, please complete the financial breakdown sheet, group housing form, and include ONE check. If for the entire group. If paying by credit card, please contact the ISM office.

A early bird registration postmarked by **May 1**

- ☐ early bird registration \$199
☐ CS CM CL S M L XL \$5
XXL XXXL \$7

(Please circle size & place on group t-shirt form)

- ☐ dvd (optional) \$10
☐ high ropes (optional) \$20

*must pre-register (3-6 only)

- ☐ I am the CHILD of a credentialed AG minister \$-30

**Please note: Deposits must include payment for extras (dvd, high ropes & t-shirts). If they are not paid for, students may purchase them when they arrive at camp.

TOTALCAMPAMT: _____

B regular registration postmarked by **May 21**

- ☐ regular registration \$225
☐ CS CM CL S M L XL \$5
XXL XXXL \$7

(Please circle size & place on group t-shirt form)

- ☐ dvd (optional) \$10
☐ high ropes (optional) \$20

*must pre-register (3-6 only)

- ☐ I am the CHILD of a credentialed AG minister \$-30

**Please note: Deposits must include payment for extras (dvd, high ropes & t-shirts). If they are not paid for, students may purchase them when they arrive at camp.

TOTALCAMPAMT: _____

C late registration postmarked **after May 21**

- ☐ late registration \$250
☐ I am the CHILD of a credentialed AG minister \$-30

All late registrants will have the opportunity to purchase a t-shirt or dvd at the camp store when camp begins.

TOTALCAMPAMT: _____

step 4: please complete with parent or guardian information

CAMPER NAME _____

[illegible]

PARENT/GUARDIAN NAME(S)

[illegible]

PARENT/GUARDIAN PHONE NO.

[illegible]

PARENT/GUARDIAN EMAIL ADDRESS

[illegible]

ALTERNATE EMERGENCY CONTACT PERSON

[illegible]

EMERGENCY CONTACT PHONE NO.

[illegible]

EMERGENCY CONTACT PERSON'S RELATIONSHIP TO CAMPER

[illegible]

Early departure Policy: Only an authorized person designated on the registration form may remove a camper from camp early. Please list authorized person(s).

[illegible]

Is there anyone to whom we should NOT release your child? Please list complete name (s).

[illegible]

step 5: Please complete with health care information - must be completed by parent or guardian on a separate piece of paper please explain any checked items AND list any medications (name/reason/instructions) camper is taking. All medications, prescriptions, and over-the-counter drugs must be brought in the original container to the nurse during registration. PLEASE DO NOT SEND EXPIRED MEDS!

INSURANCE CARRIER

[illegible]

COVERAGE START

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INSURANCE CO PHONE NUMBER

[illegible]

INSURED'S NAME (FIRST)

[illegible]

(LAST)

[illegible]

INSURANCE / POLICY / OR GROUP NUMBER

[illegible]

Does the camper have allergies? ☐ Yes ☐ No If yes, please explain: _____

Please list the year camper received the following immunizations:

Diphtheria _____ Whooping Cough _____ Polio _____ Tetanus Toxoid _____

What communicable diseases has this camper had?

☐ Measles ☐ Polio ☐ Mumps ☐ Chicken Pox ☐ Scarlet Fever ☐ Whooping Cough ☐ Other _____

Does camper have: ☐ Heart Trouble ☐ Ear Trouble ☐ Asthma ☐ Hernia

☐ Pregnancy ☐ HIV/AIDS ☐ Other _____

Is there any information we should have regarding the welfare of this camper (handicaps, restrictions, etc.?)

step 6: Please read and sign
no camper can be accepted without both their signature and a parent/guardian signature

I do hereby state that I have legal custody of this child, a minor, who resides with me. While this minor is a registered camper at any Illinois Assemblies of God summer camp, I hereby authorize any director, counselor, nurse, dean, lifeguard, or other responsible person of said Camp to consent to any x-ray, examination, anesthetic, medical or surgical treatment, and hospital care, to be rendered to this minor under the general or special supervision and on the advice of any physician or surgeon licensed to practice in the United States, when such medical or surgical treatment is necessary. I also give permission for my child to receive over-the-counter medication from the camp nurse if necessary.

We give full permission to Illinois Assemblies of God summer camps to reproduce any photograph and/or video image of me/my student for promotional usage without obligation to me/my student. We have read the rules and agree to abide by them and do hereby give permission to participate in all camp activities.

Parent/Guardian Signature (Required)

Date