



June 16 – June 22, 2012

CAMP DIRECTOR:

Ray Williams
4111 Norcross Road
Hixson, TN 37343
(423) 877-9118 (home)
hesalive13@comcast.net

Registrar:
Lynne Fry
(423) 775-0466

CAMP COMMITTEE:

Camp Operated By:
Dixieland Leadership Camp Inc

Web Site:
www.dixielandleadershipcamp.com

CAMP FEES:

Junior High = \$255.00
High School = \$295.00

Dear Leaders & Parents,

Dixieland Leadership Camp is a camp for AWANA clubbers and is located in the Tennessee Valley. Do not miss this opportunity for your clubbers to spend a whole week with "cream of the crop" AWANA clubbers from all over several states. No matter whether they've been to Leadership Camp before or this is their first time, you won't want your clubbers to miss this experience, quite possibly the most exciting week of their lives!

Dixieland Leadership Camp takes place at Fort Bluff Camp in the beautiful mountains of Tennessee. Located near Dayton, Tennessee, it provides wonderful facilities. An Olympic size swimming pool, tennis courts, volleyball, basketball, fishing, miniature golf, the "blob" on the lake, an awesome water slide and much more! All of this, and a specially designed team shirt and discipleship workbook. All Activity fees are included in the registration fees.

All T&T, Trek, or Journey kids entering fifth grade or higher and have completed this years book are eligible for camp. First time campers must have completed two books and have earned an Excellence Award prior to the start of camp. Campers are eligible to attend with completion of one year of club with their Pastor's approval. Returning campers must complete one book each year to be eligible to return to camp. Junior high campers must be at least 9 years old and High School campers must be at least 13 years old by the first day of camp. High School campers must have completed this years 24/7 doctrinal study and elective to be eligible.

Because Leadership campers have been involved in Awana clubs for several years, most have already accepted Christ as Savior and the motivation for spiritual growth is high. Our carefully screened and hand-picked adult counselors love kids and have several years experience working with kids. Now you have one of the greatest environments in the world for your kids to spend a whole week!

A very important part of Dixieland Leadership Camp is the Bible classes and chapel services designed just for young people. Personal workbooks assist in studying and applying God's Word. This will, without a doubt, be one of the greatest opportunities of the year for your child or teenager! In addition, all our High School campers will get valuable ministry tools training and experiences reserved only for them.

Only at Dixieland Leadership Camp can you experience the BEST of everything: BEST in fun, BEST in new experiences, BEST Christian friendships, BEST spiritual growth and the BEST Christian adult counselors. Dixieland Leadership Camp is very unique and the very best of summer camps. **Please encourage parents to register early!** If there are any questions we can help with, please don't hesitate to call us.

Junior High camp fee for 2012 is \$255.00, the High School fee is \$295.00.

By the way, if you have adult leadership that would really love to have an awesome new experience as counselors in a very unique environment please have them write or call for applications. We are looking forward to seeing your clubbers at Dixieland Leadership Camp!

Your camper acceptance packet will be sent via email after your application has been processed and approved. Please include your current email address on the form where indicated.

Your Camp Director,
Pastor Ray Williams

Dixieland Leadership Camp

Place: Fort Bluff Camp, Dayton, TN, Camp Date: June 16 – June 22, 2012

CAMPER INFORMATION

Please print legibly for all information.

Please check one: **Junior High (Fee = \$255.00)** **High School (Fee = \$295.00)**

Campers entering 9th grade next fall may come as junior high or high school.

Applicant's Full Name: _____ Date of Birth: _____ Age: _____

Name or nickname you prefer to be called (if different from above): _____ (circle one): Male Female

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

Home Phone: (____) _____ Family E-mail Address: _____

(Circle one) Grade next fall: 5 6 7 8 9 10 11 12 Graduate Adult Shirt Size: S M L XL XXL

If you have ONE roommate preference in your age/grade level, please give their full name _____

Every attempt will be made to honor your request.

SPONSOR INFORMATION

Camper is sponsored by: Church Parent Clubber Other

Sponsor's Name _____ Address _____

City _____ State _____ Zip _____

TO BE FILLED IN BY THE APPLICANT'S AWANA COMMANDER OR DIRECTOR

Church: _____ Registration Number: _____

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

Check awards earned: Excellence Timothy Meritorious Citation

Check all completed books – Circle Handbook/manual completed this year

- | | | |
|-------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> T&T Book 1 | <input type="checkbox"/> Trek Book 1 | <input type="checkbox"/> Main Study One & Elective |
| <input type="checkbox"/> T&T Book 2 | <input type="checkbox"/> Trek Book 2 | <input type="checkbox"/> Main Study Two & Elective |
| <input type="checkbox"/> T&T Book 3 | <input type="checkbox"/> Trek Book 3 | <input type="checkbox"/> Main Study Three & Elective |
| <input type="checkbox"/> T&T Book 4 | | <input type="checkbox"/> Main Study Four & Elective |

(Main Studies MUST include an elective study)

Grace Year

Returning campers must complete one additional handbook/manual in the current progression this club year.

I confirm that this Applicant has met camp eligibility requirements and recommend her/him for Dixieland Leadership Camp. I further confirm that the Applicant and the Applicant's family have completed this Application and have provided all necessary signatures and information, and that I have not signed on behalf of the Applicant or parents/guardians unless the Applicant is my child.

Pastor, Commander or Director Signature (**required for acceptance**)

IF THIS SECTION IS NOT COMPLETE THE APPLICATION WILL NOT BE ACCEPTED & WILL BE RETURNED

Title (Commander or Director) (____) _____
Phone number (of signatory) E-mail address (of signatory)

REMEMBER TO REGISTER EARLY

We recommend that you keep a copy for your records.

Junior High camp cost is \$50.00 registration fee + \$205.00 camp fee = total cost \$255.00. High School camp cost is \$50.00 registration fee + \$245.00 camp fee = total cost \$295.00. Registration fee is nonrefundable. **Both this form and Parental Consent form must be COMPLETE to be accepted. Make sure to include a copy of your health insurance card with application.** MAIL THESE FORMS WITH REGISTRATION FEE TO: **Dixieland Camp Registrar**, 4212 Old Washington Hwy, Dayton, TN 37321. Make checks payable to DIXIELAND LEADERSHIP CAMP. Balance of camp fee must be paid by June 1, 2012. Applications not paid in full by June 1st will be placed on standby. Registrations are accepted until the camp is filled.

DIXIELAND LEADERSHIP CAMP
Parental Consent and Release of Liability
Please Print and Provide All Information Requested

IMPORTANT: THIS DOCUMENT CONTAINS A RELEASE OF LIABILITY. YOU ARE ADVISED TO REVIEW IT CAREFULLY.

Name of Camper: _____ Camper's Date of Birth: _____

Camp Location: Fort Bluff Camp, Dayton, TN Dates Camper Will Attend Camp: June 16 – 22, 2012

I understand and agree that participation in the Dixieland Leadership Camp ("Camp") is a privilege to which my minor child named above ("Camper") is not otherwise entitled. In consideration for that privilege, I am signing this Parental Consent and Release of Liability.

Consent to Attend Camp

I hereby give permission for Camper to attend and participate in the Camp.

Consent to Medical Treatment

If Camper experiences an injury or illness, or has other medical needs, I authorize the Camp's employees, volunteers, and agents to make such arrangements for Camper's health and safety, including but not limited to first aid, emergency medical care, ambulance or other transportation to a hospital, medical office, or clinic, testing and examination, and hospital care, and other medical care and treatment (including dental care) as they feel are appropriate in the circumstances. I further agree that I am fully responsible to pay all charges and expenses relating to such care, transportation and treatment and I hereby fully release DLCL and its directors, officers, employees, volunteers and agents from any claims, including claims for medical charges, prescription costs and other expense, I might have as a result of such care, transportation and treatment. My signature below also serves to indicate my willingness for my Health Insurance Company (please provide details in the **Medical Information** section) to be billed for any and all medical fees and services should they be needed. I agree that I will pay all charges and expenses not covered by insurance.

Medical Information

Medical Insurance Co.: _____ Policy Number: _____
(Please attach a copy, front and back, of your insurance card)

Address: _____

Phone: (____) _____ Insured's Name: _____

Doctor's Name: _____ Phone: (____) _____

Date of last tetanus: _____ Date of last physical: _____

List any medical or food allergies of **Camper** (please write "None" if applicable): _____

Will Camper be under any medication* while at camp? Yes No If yes, please provide details: _____

***All medications are to be in original containers with prescription attached and given to the camp nurse.**

The camp nurse has our (my) permission to provide Camper with non-prescription medicines as deemed necessary.

Yes No Please list any over-the-counter medicines that should **not** be given to **Camper**. _____

Does **Camper** have any physical condition or limitations that would restrict participation in any camp activities?

Yes No If yes, please provide details: _____

Release of Liability

Prior to Camper's participation in Camp activities, I acknowledge that involvement of Camper in the Camp may involve risk of property damage and of personal injury, illness or even death of Camper, including but not limited to the risks arising from transportation-related activities, recreational activities, accidents in the outdoors and rustic facilities, adverse

weather conditions, and injuries and illness as a result of food-borne illnesses and allergic reactions. In addition, I understand that there may be other risks inherent in Camp activities of which I may not be presently aware.

By signing this Parental Consent and Release of Liability, I warrant that Camper is fully capable of safely participating in all Camp activities, and I expressly assume all risks of Camper's participation, whether such risks are known or unknown to me at this time. I further generally release Dixieland Leadership Camp, Inc. and its directors, officers, employees, volunteers, and agents, and other campers at the Camp, from any and all claims that I or Camper may have against any of them as a result of property damage or personal injury, illness or death of Camper as a result of participation in Camp activities, whether on or off Camp grounds. I agree that this release includes the ordinary, special and inherent risks described above, and other risks that I may not foresee or be aware of at this time. This Release of Liability is given on behalf of myself, Camper, and the heirs, family, estate, administrators, executors, personal representatives and assigns of me and Camper.

Other Releases and Acknowledgements

I acknowledge receipt of the Child Protection and Safety letter provided in the Dixieland Leadership Camp registration packet.

I understand that, while Camper is participating in Camp activities, photographs, film, audio recordings and videotape of Camper may be taken for use in brochures, videos, releases to the press, and various DLCL publications and other work product. I do hereby irrevocably grant DLCL permission to record, display and/or reproduce my child's name, likeness and voice on audio and/or video tape, film or other media, to edit and otherwise modify such media at its discretion, to incorporate the media into any work product, and to use or authorize the use of such media or any portion thereof in any manner or media or by any means, methods or technologies now known or hereafter to be known.

I understand that DLCL does not provide transportation to or from the Dixieland Leadership Camp program and do hereby take responsibility for either providing or arranging for transportation of Camper, and for ensuring that Camper will arrive and depart by the scheduled dates and times.

I will ensure Camper only brings clothing that adheres to the Camp Dress Code or similar policy included as part of this package or to be sent in the acceptance package. If Camper fails to abide by established rules, standards of conduct and/or Camp Dress Code, Dixieland Leadership Camp staff reserve the right to send Camper home. If it becomes necessary to send Camper home, I hereby agree to provide transportation or to make travel arrangements for Camper and to assume the cost of these expenses.

To the extent any provision of this document is found to be unenforceable, such provision shall be deemed severable and shall not affect the enforceability of any other portion of this document, and shall be reformed to be in compliance with the law and construed to most nearly reflect the intent of the parties.

I represent and warrant that I am a parent or legal guardian of the Camper named above and have the full power and authority to enter into this Parental Consent and Release of Liability on behalf of the Camper. By signing below, I acknowledge that this document has been read and understood by me, and also represent that all information provided is accurate. Each legally responsible parent/guardian is required to sign below.

1st Parent or Guardian signature Parent or Guardian signature

2nd Parent or Guardian signature Parent or Guardian signature

Name Printed

Name Printed

Date Signed

Date Signed

Daytime Phone

Daytime Phone

Evening Phone

Other Phone

Witness (Notary Public preferred)
(must be age 21 or older and not a relative)

Date

(Notary Seal)

Administration Use Only:

Date: _____ Check #: _____ Amount: \$ _____