



# 2010 SUMMER CAMP REGISTRATION

*Come to the Valley Set Apart for a great week of camp!*

## Summer Camp Dates & Fees

<u>Week</u>	<u>Dates</u>	<u>Price</u>
1	June 6-12	\$475
2	June 13-19	\$475
3	June 20-26	\$525
4	June 27-July 3	\$500
5	July 11-17	\$525
6	July 18-24	\$500
7	July 25-31	\$475
8	Aug 1-7	\$460

## Leadership Development Dates & Fees

### **Nehemiah & Timothy Team Sessions**

Session 1	June 6-19	\$625
Session 2	June 20-July 3	\$625
Session 3	July 11-24	\$625
Session 4	July 25-August 7	\$625

### **Soma Sessions**

Session 1	June 6-July 8	\$500
Session 2	July 8-August 7	\$500

*(Timothy Team was formerly LIT)*

*(Soma was formerly CIT)*

The New Life Ranch Leadership Development Ministry seeks to challenge the lives of campers with new experiences designed to transform them into leaders for Jesus Christ. Through deliberate activities & purposeful jobs, campers will be molded into a team focused on maturing, serving, and leading. Students can begin the Leadership Development Program when they are going into the 10th grade. For more information or to download a registration packet please visit [www.newliferanch.com](http://www.newliferanch.com).

## How do I register my camper?

- Complete this form **OR** Register online at [www.newliferanch.com](http://www.newliferanch.com)
- Pay a deposit of \$100 per camper, per week (*included in total fees*)
- For each camper, we also need:
  - A completed health form (*Can be completed ONLINE*)
  - a Paintball release form (*if your camper will be playing paintball*)
- Download a Guide to Camp from the website for theme info, packing list and other useful information.
- Pay any remaining balance two weeks before your week of camp starts.

## Why are the weeks of camp priced differently?

Every week of camp at New Life Ranch is essentially the same camp experience. Each week has different themes and different speakers, but all the staff and programming (schedule, free time activities, activity classes, etc.) are the same. We price the weeks of camp differently based on scheduling demand, not on any difference in quality of staff or programming. Early weeks and late weeks are historically less attended, so we are trying to encourage a full week of camp for every camper regardless of which week of camp is selected.

## **Our Mission Statement:**

To proclaim the gospel of Jesus Christ and to equip believers for ministry.

## **Overall Objectives:**

The ministry at New Life Ranch is programmed to offer staff and all participants:

1. A spiritually, emotionally and physically safe place
2. An opportunity and environment for Biblical, spiritual growth
3. An exceptional educational experience

## **We accomplish this by:**

1. Building relationships between campers and our staff
2. Teaching practical Christianity through the active Christian lifestyles of our staff
3. Creating unique programming
4. Providing educationally and spiritually sound materials and activities
5. Providing safe programming
6. Providing quality training and support for staff by NLR leadership

Please visit our website for more information!

[www.newliferanch.com](http://www.newliferanch.com)

160 New Life Ranch  
Drive  
Colcord, OK 74338  
(918) 422-5506  
(918) 422-5644 fax  
[info@newliferanch.com](mailto:info@newliferanch.com)



## Registration and Cancellation Policies

Deposits are non-refundable and non-transferable. Cancellations or change requests can be made up to two weeks prior to your camp date (no refund of deposit will be made). Due to frequent cabin switches, NLR **cannot** give advance notice of a camper's cabin. For more information on registration policies, please visit our website: [www.newliferanch.com](http://www.newliferanch.com)

## Camper Safety

Any camp activity may result in physical harm. However, the excellent safety record of NLR shows that we care deeply for your camper and plan our programs to be as safe as possible. In case of an emergency, the attached health form will be our source of medical information. PLEASE be thorough in filling it out. **It is our policy to notify the parents of any camper who is injured or ill.**

**CAMPER/STAFF RATIOS:** New Life Ranch prides itself on the fact that we have enough staff to provide a quality week for your camper. We do our best to maintain a 1:6 ration (counselor:camper).

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**NEW LIFE RANCH DISCOUNTS:** *Discounts are not deducted from the \$100.00 registration deposit. All discounts apply to each camper, each week they attend.*

**EARLY REGISTRATION DISCOUNT:** Receive a \$10.00 discount for sending in your registration form and paying the \$100 deposit by January 1, 2010. (*NOTE: Discount will NOT be applied until you have paid your deposit.*)

**PRE-PAYMENT DISCOUNT:** Receive an additional \$10 discount for making full payment of all fees by March 1, 2010.

**FAMILY DISCOUNT:** A \$20 discount per child, per week they attend will be given to families who send two or more campers from the same immediate family.

**BUDDY BUCKS DISCOUNT:** If you invite a friend who has never been to NLR before, you will receive \$20 off your camp fee when your buddy is confirmed.

*"BUDDY BUCKS" explained: If you invite a friend who has never been to NLR before, and they:*

- 1. are from a different household, and*
- 2. put your name on the BUDDY BUCKS registration line, and*
- 3. are confirmed for camp, you will receive \$20 off of your camp fee. (Five friends equals \$100) No buddy bucks will be*

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**EXPLANATION OF ACTIVITY CLASS FEES:** Senior campers will take two classes per week. Junior campers will take a variety of classes throughout the week (*excluding the classes with an additional fee.*) Paintball does not count as one of your two activity classes.

**Activity classes that require no additional fee:** (*campers will sign up for these classes upon arrival at camp*) Riflery, Archery, Drama, Mountain Man, Arts and Crafts, Canoeing, Swimming, Gym and Field Sports, Disc Golf, Tennis, Weightlifting, Photography, Skeet Shooting, and Slingshot. (*classes subject to change*)

**Activity classes with an additional weekly fee:** (*Sign up on this registration form*) Ropes, Climbing & Rappelling, Horsemanship, Horse Vaulting, and Mt. Biking\*

**MT. BIKING: \$35 fee per week for bike and helmet rental.\***

*\* No fee is charged if the camper brings his/her own bike and helmet. Please check the Mt. Biking box on the Registration form even if the camper is bringing his/her own Mt. Bike and helmet.*

**PAINTBALL: \$30 per week.** Senior campers have the chance to participate in a game of paintball on **Thursday afternoon during free time.** Campers receive all equipment, professional referees, and 100 paintballs for a three hour game of paintball. (Additional paintballs can be purchased at the rate of 100 for \$5.00 which is deducted from the camper's Canteen account).

**Pre-paid Items:** For your convenience, we have included the option to pre-order your camp picture, theme T-shirt, and camp DVD. For T-shirts, please indicate the size of shirt your camper will wear on the attached registration form. If you pre-order a t-shirt, it will be ready when your camper arrives on Sunday. T-shirts will still be available after camp starts. The all-camp picture and DVD will be available for pick-up or purchase on Saturday morning.



# 2010 Summer Camp Registration Form

Please print and please use one form for each camper (you may copy this form)

Mail completed form and payment to: **REGISTRAR, NEW LIFE RANCH, 160 New Life Ranch Dr, Colcord, OK 74338**

Camper's Name: First \_\_\_\_\_ Last \_\_\_\_\_

**Parent or Guardian 1** (Father)

Name: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_ Occupation: \_\_\_\_\_

**Parent or Guardian 2** (Mother)

Name: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact (in case you can't be reached): \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone #1: (\_\_\_\_\_) \_\_\_\_\_ Phone #2: (\_\_\_\_\_) \_\_\_\_\_

Birth day: \_\_\_/\_\_\_/\_\_\_ Gender: M F Grade going into Fall 2010: \_\_\_ First-time NLR Summer Camper? \_\_\_

School: \_\_\_\_\_

**Buddy Bucks:** (gives your friend a \$20 discount) I have never been to NLR & was invited by: (Camper's Name) \_\_\_\_\_

Church: \_\_\_\_\_ **T-Shirt Size:** Youth M L Adult S M L XL XXL

**Cabin Mate Request:** First name: \_\_\_\_\_ Last name: \_\_\_\_\_

*(You may request only 1 cabin mate per week within 1 grade of each other. Junior campers (grades 3-6) & Senior campers (grades 7-12) may not stay in the same cabin. We will make our best attempt to honor your request.)*

Would the camper's **GRANDPARENT** like a FREE copy of the camp picture? If so, please provide the following information:

Name: \_\_\_\_\_ Addr: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

**The total fee for a week of camp includes a non-refundable and non-transferable \$100 registration deposit. The deposit and a completed registration form are required before you can be confirmed for camp.** All activity class fees and stay-over fees are to be sent in with the deposit. If NLR cannot get you in for the weeks you choose, your deposit will be refunded. There are activity classes that require no additional fees—senior campers will sign up for these upon arrival at camp, junior campers rotate through a variety of activity classes.

<b>Registration Deposit</b>	Wk # _____	<b>\$100</b>	_____
Horseanship Class	Wk # _____	\$55	_____
<b>Activity Classes</b>			
Horse Vaulting	Wk # _____	\$40	_____
Mountain Biking	Wk # _____	\$35	_____
Mountain Biking (w/ own bike)*	Wk # _____	\$ 0*	_____
Climbing & Rappelling	Wk # _____	\$45	_____
Ropes Course (7-12 graders only)	Wk # _____	\$45	_____
Paintball Game (7-12 graders only)	Wk # _____	\$30	_____
Canteen Deposit (we recommend \$30-50)		varies	_____
Camp Picture	Wk # _____	\$ 5	_____
Camp DVD	Wk # _____	\$15	_____
Theme T-Shirt		\$14	_____
Stay-Over Fee		\$70	_____
<b>Total amount to be sent in with Registration Form</b>			_____

**Check the week(s) your camper wants to attend**

*NOTE: There is no Senior Week this year. All weeks are for all ages.*

Week	Dates	
1	June 6-12 (\$475)	<input type="checkbox"/>
2	June 13-19 (\$475)	<input type="checkbox"/>
3	June 20-26 (\$525)	<input type="checkbox"/>
4	June 27-July3 (\$500)	<input type="checkbox"/>
5	July 11-17 (\$525)	<input type="checkbox"/>
6	July 18-24 (\$500)	<input type="checkbox"/>
7	July 25-31 (\$475)	<input type="checkbox"/>
8	Aug 1-7 (\$460)	<input type="checkbox"/>

**Enter any Promo Codes here:** \_\_\_\_\_

To Charge a Credit Card: (circle one) Visa M/C  
 Card #: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Amt \$ \_\_\_\_\_ Exp. Date (mm/yy): \_\_\_\_/\_\_\_\_  
 CVV (3 digit code on back): \_\_\_\_\_

**For Office Use Only:** P/mark: \_\_\_\_\_ P/CB: \_\_\_\_\_  
 Ck/Au: \_\_\_\_\_ Amt: \_\_\_\_\_ WL: \_\_\_\_\_ CXL: \_\_\_\_\_ Change: \_\_\_\_\_

Camper Name: \_\_\_\_\_ Week: \_\_\_\_\_

**HEALTH HISTORY**

(Check, if applies. Give approximate dates.)

- \_\_\_\_\_ Frequent Ear Infections
- \_\_\_\_\_ Heart Defect/Disease
- \_\_\_\_\_ Convulsions/Epilepsy
- \_\_\_\_\_ Diabetes
- \_\_\_\_\_ Bleeding/Clotting Disorders
- \_\_\_\_\_ Hypertension
- \_\_\_\_\_ A.D.D./A.D.H.D
- \_\_\_\_\_ Mononucleosis
- \_\_\_\_\_ Bedwetting
- \_\_\_\_\_ Sleepwalking
- \_\_\_\_\_ Mononucleosis
- \_\_\_\_\_ Bedwetting
- \_\_\_\_\_ Sleepwalking
- \_\_\_\_\_ Chicken Pox
- \_\_\_\_\_ Measles
- \_\_\_\_\_ German Measles
- \_\_\_\_\_ Mumps

**Food Allergies:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ALLERGIES** (Dates not needed)

- \_\_\_\_\_ Hay Fever
- \_\_\_\_\_ Ivy Poisoning, etc. (see below)
- \_\_\_\_\_ Insect Stings (see below)
- \_\_\_\_\_ Asthma
- \_\_\_\_\_ Penicillin
- \_\_\_\_\_ Other Drugs

List: \_\_\_\_\_

**Is allergy severe enough to keep your child from participating from activities in the woods?**

Yes \_\_\_\_\_ No \_\_\_\_\_

Family physician: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Dentist/Orthodontist: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Disabilities, recurring illnesses, psychological conditions we should be aware of (*give dates*): \_\_\_\_\_

Activities limited by a physician: \_\_\_\_\_

Any dietary restrictions? \_\_\_\_\_

*(NLR will not provide special meals, but we will inform our staff of a camper's restrictions and help them choose allowed foods from our regular menu.)*

List any medication to be administered at camp & diagnosis or reason for taking (*specific times & doses*): \_\_\_\_\_

**\*\*NO MEDICATION WILL BE GIVEN WITHOUT SPECIFIC ADMINISTRATION INSTRUCTIONS\*\*** (*All medication must be turned into the nurse upon arrival at camp. Campers will not be allowed to have medication in their cabin.*)

**FOR FEMALES (next two lines):**

Has she menstruated? \_\_\_\_\_ If not, has she been told about it? \_\_\_\_\_ If so, is her menstrual history normal? \_\_\_\_\_

Special Instructions? \_\_\_\_\_

Immunizations current? (*circle one*) Yes No Date of last tetanus booster: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of last physical exam \_\_\_\_/\_\_\_\_/\_\_\_\_

**CAMPER PROFILE – please fill out the information below to help our counselors.**

Has the camper been affected by a death, divorce or traumatic experience recently (or is still dealing with one of these situations)? If so, please explain: \_\_\_\_\_

What three words describe your camper's personality? \_\_\_\_\_

Is your child a Christian? If so, what role does Christ play in his/her life, if any? \_\_\_\_\_

Special concerns or needs that you have as a parent regarding your camper while he/she is at camp? \_\_\_\_\_

What do *you* desire your camper to gain from camp? \_\_\_\_\_

What does *your camper* want to gain from camp? \_\_\_\_\_

**INSURANCE INFORMATION:** *Note here if you don't have insurance:*  **Health Insurance Carrier:** \_\_\_\_\_

Insurance Mailing Address: (*Street, City, State, Zip*) \_\_\_\_\_

Group #: \_\_\_\_\_ Policy #: \_\_\_\_\_ Co-Pay Amt: \$ \_\_\_\_\_ Deductible Amt: \$ \_\_\_\_\_ Rx Plan: \_\_\_\_\_

Primary Policy Holder Name: \_\_\_\_\_ Policy Holder ID (SSN): \_\_\_\_\_ Policy Holder Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Policy Holder Employer: \_\_\_\_\_ Camper Insurance ID (SSN): \_\_\_\_\_ Camper Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

**PLEASE READ CAREFULLY:** I hereby attest that I have read and reviewed this form and have completed it accurately and will report any information that may change. I therefore agree that this child may participate in all camp activities including travel off of the property. Also, I give permission for NLR to use images and recordings of my child/ward without further compensation. I realize that in the event of an illness or injury while at camp or while participating in it's activities, medical treatment may be required. I give permission for the medical personnel selected by the camp director to order any medical procedures, including x-rays, routine tests, treatment, hospitalization and transportation. Furthermore, I agree to bear the cost of all such treatment. I also agree to hold harmless New Life Ranch, it's staff, and board of directors from any and all liabilities, claims, demands and causes of action whatsoever which may arise due to the participation of myself or this child in said activities.

**And for our camp Doctor, Community Physicians Group:**

I hereby authorize payment directly to Community Physicians Group and any consulting physicians insurance benefits otherwise payable to me or my minor dependents. I understand that I am financially responsible for charges not covered by this authorization. I hereby authorize release of information requested of Community Physicians Group and any consulting physician. I further agree to allow Community Physicians Group to release medical information on me or any of my minor dependents if requested by any insurance company for purpose of determining benefits payable.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_