

**High Pursuit 2017**  
**Church Registration Form**  
**Tall Timbers Baptist Conference Center**  
Thursday-Saturday, June 29-July 1, 2017

*Check-in is 2-5pm Monday and camp ends at approximately 11:30am on Friday.*

Contact Person \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City/ST/Zip \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_

CHURCH \_\_\_\_\_  
Pastor \_\_\_\_\_  
Church Address \_\_\_\_\_  
Church City/ST/Zip \_\_\_\_\_  
Pastor/Church Email \_\_\_\_\_

**Early Bird Registration: \$190\* by April 29, 2017**

*...A \$50 per person deposit required per person.*

***A \$20 per person credit will be applied for churches who attended a Tall Timbers' Clear Camp in 2016 if registered by April 29!***

**Regular Registration: \$240\* after April 29, 2017**

*...A \$50 per person deposit required per person.*

*Counselor fees are the same as camper fees.*

**\*Lee Lodge rooms available first-come-first-served basis for additional \$20 per person.**

Prefer Lee Lodge

***Credit cards or church checks made payable to Tall Timbers are accepted. Registrations and deposits will be received no earlier than Feb 1, 2017.***

**NOTE: CAMP BALANCE IS DUE by or at CHECK-IN!**

- **DEPOSITS are NON-REFUNDABLE!** No money will be refunded for cancellations for any reason. *(example: if deposit is paid for 40 and 37 come to camp, deposit is forfeited for those that do not come)*
- Complete **ALL** information on registration form – **VERY IMPORTANT – deadline for camper/counselor names/info due 2 weeks before camp!**  
For forms sent in without names: # of females \_\_\_\_\_ # of males \_\_\_\_\_ to reserve correct number of gender bed spaces.
- Each camper **AND** adult sponsor must submit the **Tall Timbers Parental Permission to Participate and Health form** with signature. Make copies of completed forms (1 for counselor and 1 for Tall Timbers' office) and **bring** them to camp check-in (do not mail). Counselors **DO** need Health Forms.

∞Groups must provide ONE (1), SAME GENDER, ADULT SPONSOR/COUNSELOR for every 8 students. Counselors must be at least 21 years old. Student groups are not allowed to attend Clear Camp alone. Adults must attend Clear Camp with your students AND STAY WITH THEM the entire week of camp. The Louisiana Baptist Convention, Clear Camp staff, or Tall Timbers does not provide adult sponsors for your group!

∞Camp is for students who have completed 7<sup>th</sup>-12<sup>th</sup> grade (6<sup>th</sup> grade is allowed if they are a regular part of your youth ministry) and their respective adult leaders. Children younger than those ages or younger children of adult sponsors/leaders are not permitted at camp. Bed space is tight. We must reserve all available space for which the camp is designed.

**MORE INFORMATION ABOUT CAMP**

Contact the Youth Ministry Strategy Office at the Louisiana Baptist Building at 800.622.6549/318.448.3402. Email [Steve.Maltempi@LouisianaBaptists.org](mailto:Steve.Maltempi@LouisianaBaptists.org) or [Julie.Woodrum@LouisianaBaptists.org](mailto:Julie.Woodrum@LouisianaBaptists.org).

**SEND REGISTRATIONS TO:**

Tall Timbers – PO Box 258  
Woodworth, LA 71485  
318.445.6797 – Fax 318.445.1038  
talltimbers@talltimbersbcc.org

CC# \_\_\_\_\_  
Expiration \_\_\_/\_\_\_ 3 digit code on back \_\_\_\_\_  
Billing PO Box or Street number Only \_\_\_\_\_  
Zip \_\_\_\_\_ Amount: \$ \_\_\_\_\_

COUNSELOR NAME	Cell Phone	CITY/ST/ZIP	Age	GENDER	SHIRT SIZE

Shirt Sizes: AS, AM, AL, AXL, A2XL, A3XL, A4XL

<b>Camper Name</b>	<b>Parent Cell Phone</b>	<b>Gender</b>	<b>Grade 2016- 2017</b>	<b>Tee Size</b>	<b>Parent Name</b>

Shirt Sizes: AS, AM, AL, AXL, A2XL, A3XL, A4XL (may duplicate this form for additional campers)

Church \_\_\_\_\_

Camp \_\_\_\_\_

**Parental Permission to Participate and Health Form**

*This form must be filled out and signed by each parent/guardian for camper to participate. Counselors also must complete and sign forms for themselves. Please do not mail this form. Bring with you at registration.*

**Camper or Counselor Name** \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Grade Completed This Year \_\_\_\_\_ Tee shirt size \_\_\_\_\_

**Name of Parent or Legal Guardian** \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Telephone: Home (\_\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_\_) \_\_\_\_\_

Cell (\_\_\_\_\_) \_\_\_\_\_

**Name of camper/counselor physician** \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_

Health Insurance \_\_\_\_\_ ID Number \_\_\_\_\_

**Please list two people who may be contacted in case parent/guardian cannot be reached in an emergency:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

**General Health and Medical History**

1. List any chronic or long-term illness: \_\_\_\_\_

2. Serious injuries or surgeries: \_\_\_\_\_

3. Known allergies: \_\_\_\_\_

Explain reaction and indicate medication used or other action to be taken:

\_\_\_\_\_

Explain any physical/medical conditions that we should be aware of:

\_\_\_\_\_

**Tall Timbers does not** provide a camp nurse. Church counselors must take care of the minor medical needs of the campers they bring, including keeping and dispensing medications, minor first aid, etc., and if a trip to the ER is needed, they must take them. The responsible counselor will bring this health form for each camper and is responsible for the care of their campers while here.

Is camper bringing medication to camp? Yes \_\_\_ No \_\_\_ If yes, please list all medications on back of this form.

**Medication must be in pharmacy container with patient's name and the dosage instructions on it.** If dosage instructions are different, please note, and sign your name.

**Restrictions:** Does camper have any activity restrictions? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please specify: \_\_\_\_\_

**List up to 4 people who are authorized by the parent/guardian to check out a camper from Tall Timbers:**

\_\_\_\_\_  
\_\_\_\_\_

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

*Signatures authorize Tall Timbers to use photographs, films, and/or voice recording whether by audio, videotape, or other images of my child (participant) for the purpose of and use in promotional material, website, video, podcasts, and publications. Parents/Guardians understand that they will not receive any payment or other remuneration for this authorization.*