

# Camp Id-Ra-Ha-Je West

27862 County Rd. 12, Somerset, CO 81434 (970)929-5221

## 2008 Summer Camp Registration Form

### Key Items to Note:

**Camper Immunization Forms:** The State of Colorado requires a complete form to be filled out of all immunizations a camper has received. We are including this form in the registration packet. **It must be filled out and signed in original ink.** You may choose the exemption option on the back of the form. But this form must be filled out and submitted to the camp no later than the time you bring your child to camp. If your child was a camper last year, check with us to see if we have the needed Immunization Form.

### Other Camper Registration Considerations...

- 1. Requesting Roommates:** We do our best to accommodate roommate request. Roommate requests can only be accommodated on registrations postmarked by May 1, 2008.
- 2. Camper Pickup Times:** Please make sure you are here on time to pick up your campers. This enables our staff to prepare for the next camp.
- 3. We will not be able to reserve camping spots over the phone:** There are approximately 56 vacant spots for each camp. These are filled from mailed in applications on a first come, first served basis. Once a camp is full, we will create a waiting list.

### Dear Campers & Parents,

Thank you for your interest in Camp Id-Ra-Ha-Je West's summer 2008 camping program. It is always exciting to see a brand new summer camp season approaching, and honored that you would consider us as a place to send your children and youth. We strive to provide the best possible camps each summer, with hand-picked staff and speakers, fun activities, qualified medical personnel, and excellent home-cooked meals.

We start off the summer with our Junior & Kid's camp, which begins June 15th. This is for ages 7-10, going into the 2nd through 5th grades. Middle School camp follows from June 22-27, with High School camp June 29-July4..

Please take a moment and carefully read through the registration instructions. In addition to the registration form, you will need to provide both a **Medical Exam form** AND the **State of Colorado Immunization form**. The registration form is essential to hold your camper's registration spot, but the other two forms can be provided anytime BEFORE camp starts. If your child has been here in the past two years, chances are good you won't need to fill out the immunization form. Medical forms are good for two years if the doctor's physical exam was performed with the 24 months preceding camp.

**Check-in time is between 2 and 4 pm Sundays for all three camps. Campers must be picked at 11:00 am on the last day of camp.** Please take a moment and review the front and back portions of this page carefully. We're looking forward to a great summer. If you have any questions on any portion of the registration process, including the health exam, or questions about the camping program, please don't hesitate to call us at (970)929-5221. The camp web site is [www.campwest.com](http://www.campwest.com), and our e-mail address is [campwest@gmail.com](mailto:campwest@gmail.com).

We look forward to seeing you soon!

The staff of Camp Id-Ra-Ha-Je West  
Scott & Scheie McIntire, Camp Directors

## How To Register for Summer Camp:

1. Choose which camp you want your child to attend.
2. Send in the completed and signed Registration Form with a \$40 deposit per camper to hold your spot. Please note the increase in the amount of deposit required.
3. Either send or bring a completed Medical Form prior to camp. It must contain a Doctor's signature (M.D., D.O., etc). It doesn't need to be sent in with the registration form.
4. Please bring the State of Colorado immunization form completely filled out.
5. Any physical exam signed by a doctor that occurred within the prior 24 months of camp is acceptable. The camper's name and the exam date must appear on it.
6. You may choose **ONE** roommate for your camper, and the requested roommate must also choose your camper. Registrations must be postmarked by May 1, 2008 qualify for a requested roommate.
7. **For the early discount, Registration Forms must be postmarked by May 1, 2008.**

Send Completed forms to:

### **Camp Id-Ra-Ha-Je West**

27862 County Road 12  
Somerset, CO 81434

## Important Guidelines for Summer Camp:

### **What to Bring:**

Sleeping bag, pillow, Bible, notebook, sunscreen, mosquito repellent, water bottle, prescription medications, and other personal care items. Short & long pants, sneakers, sandals, towel, and a light jacket.

### **What to Leave Home:**

Ipods, walkmans, radios, mp3 players, cassette decks, and any other music storage and retrieval devices. No laptops, DVD players, or other electronic appliances or devices. No firearms, pellet, or bb guns, paintball guns, airsoft guns, sling shots, knives, or any other kind of device that can be used or perceived as a weapon. No pepper spray or mace. Small folding pocket knives with a blade of less than 2 1/2 inches is okay.

### **Modest Clothes and Modest Behavior:**

All clothing worn at camp must be modest by the standards of the camp staff. This includes skimpy bathing suits whether one or two piece, spaghetti strap tops, shorts that are too short, pants worn too low, or shirts too high. Female top clothing must not show cleavage or have plunging necklines. Sleepwear is restricted to the cabins. Immodest clothing will be defined by anything worn that is intended to draw attention to the wearer or the body of the wearer.

Campers are to refrain from any and all physical, romantic, or sexual relationships with other campers or staff. Our staff are under the same requirement, and must refrain from counseling campers of the opposite sex.

### **Zero Tolerance Stuff:**

Use or possession of drugs, alcohol, tobacco products, pornography, firearms or potentially dangerous weapons of any kind, and other inappropriate material at camp will not be tolerated. Campers must not fight or exhibit any threatening behavior to other campers or staff, including use of profanity, stealing, or destruction of property. Zero tolerance of these items and behaviors means that parents will be called to pick up their campers if camper rules aren't followed.

**Summer camp can be a great experience for the campers and the staff. Problems are rare, yet we establish these camp rules to ensure the safety and well-being of our campers. We are here to honor and glorify the Lord, and that includes taking care of the ones entrusted to us for their time at camp. Please call if you have any questions.**

Office Use Only		
Date Rec _____	Date Postmarked _____	
Dep \$ _____	Balance _____	
Forms: Med	Immunization	Needs All

## Camp Id-Ra-Ha-Je West 2008 Camper Registration Form

Please fill in **BOTH** sides completely and clearly. Desired camp will not be guaranteed until registration is complete (excluding Dr's signature & balance due). Mail with the \$30.00 non-refundable deposit by May 1, 2008, to Camp Id-Ra-Ha-Je West, 27862 County Rd. 12, Somerset, CO 81434. Forms and deposit will be returned if a camp fills up.

<p style="text-align: center;"><b>Junior/Kid's Camp</b> June 15 - 19</p> <p>Check-in Time: 2—4 pm Pick up Time: 11:00 am—Thurs Cost: \$145 Before May 1       \$165 After May 1</p>	<p style="text-align: center;"><b>Middle School</b> June 22 - 27</p> <p>Check-in Time: 2—4 pm Pick up Time: 11:00 am Cost: \$175 By May 1       \$195 After May 1</p>	<p style="text-align: center;"><b>High School</b> June 29 - July 4</p> <p>Check-in Time: 2—4 pm Pick up Time: 11:00 am Cost: \$185 Before May 1       \$205 After May 1</p>
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<b>Please Circle Which Camp?</b>	Junior / Kid's Kamp	Middle School	High School
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<b>Camper Information</b>			
Name: _____		Birthdate: ____/____/____	
		Grade entering: _____	
Physical Address: _____		City _____ State _____ Zip _____	
Mailing Address: _____			
Phone: (    ) _____		Age: _____ Girl / Boy	
E-mail Address: _____		Home Church: _____	

<b>Financial Information</b>	
A \$40 deposit must accompany this registration form to hold a spot for your camper.	
Amount Enclosed: \$ _____ Any remaining balance can be paid up to the time of signing your camper in.	
Is the camper coming with a church group? Yes No If so, will the church be paying the camper's balance? Yes No	
Church, if different from "Home Church" indicated above: _____	

<b>Roommate Preference—They Must Also Choose You.</b>	
Name: _____ Phone: (    ) _____	
Address: _____ Relationship: Friend Sibling	
<p><b>Please Note...</b> You may request one roommate to be in your cabin. <u>They must also identify you as their requested roommate on their registration form for this to be honored.</u> If possible, send your forms in together.  <b>May 1, 2008 will be honored for roommate choice.</b></p>	

**Please Turn this Form Over...**



## Camper's Parents or Guardians

Father's Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Place of employment: \_\_\_\_\_

Employment Physical Address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Place of employment: \_\_\_\_\_

Employment Physical Address: \_\_\_\_\_

Other Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

Persons authorized to pick up child: \_\_\_\_\_

Person(s) not authorized to pick up child: \_\_\_\_\_

**Special Concerns or Needs** (include special medical or social needs or concerns):

**Thank You for your time and patience in filling out this form completely.**

**All Parents must provide an original signature at the bottom!**

I realize that children at camp can become injured. I hereby assume the risk of all injuries to my child, and hereby release and discharge Camp Id-Ra-Ha-Je West, it's staff, board, and agents from any and all liability which may result from injury to my child. Insurance protection is my responsibility. I give my permission for the camp to administer medications as it deems necessary to my child. This includes medications sent with my child, or non-prescription medications available at camp. I give my permission for my child to participate in all camp activities, both on and off camp property, either by walking or riding in camp vehicles. I give my permission for any pictures of my child taken during camp to be used for promotional slides, displays, and brochures. In case of emergency, I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the camp director to hospitalize and secure proper treatment (including surgery) for my child. I also give my child permission to participate in all camp activities including, without limitation, tubing, rappelling, and water sliding. I assume financial responsibility for my child's actions which may cause damage to property. If the staff deems it necessary for my child to be removed from camp, due to disciplinary reasons or other problems, I will respond by promptly picking up my child.

\_\_\_\_\_  
Signature of Camper's Parent or Legal Guardian (must be 18 years or older)      Camper's Signature Agreeing to follow the rules of the camp.

Relationship to child: \_\_\_\_\_      Date: \_\_\_\_\_