

# Mt Calvary Association Camp Information!!!

## TIME TO SIGN UP!!!

Yes! It's that time of the year to start gearing up for camp! We are less than two months away from what is shaping up to be a wonderful camp! I pray we have good participation in this camp despite our circumstances with

COVID! Each church is encouraged to participate and jump into the fun! My thanks to everyone behind the scenes planning this awesome annual event!

Camp is **June 7th - 10th** at Stoneridge Baptist Camp in Smithville, AR. **Bro. Jacob Guenrich** will be preaching! Jacob will be preaching through Ephesians & the kids will be SOAPing thru the book also. He is the pastor of First Baptist Church Walnut Ridge. **Max Sullivan** is our worship leader. He did an outstanding job last year & I'm excited to have him back! This year's camp theme is **"Redemption!"** and the theme passage is Ephesians 1:7. We are asking for a preliminary camper number from each church to be turned in on May 10th.

**REGISTRATION deadline is May 24th.** The cost per camper is \$35 and the association will pay the rest. The total cost this year is \$75 it previously was \$68. To register please contact our camp registrar Roger Phillips. His cell# is 501-278-1846. His email is rogless86@gmail.com. Roger asked that if there are major changes to your registration number to please contact him no later than **May 30th** so the proper arrangements can be made before it's too late.

CAMP COSTS ARE INCREASING THIS YEAR. IF YOUR CHURCH CAN GIVE \$100/\$200/\$500 TO MT CALVARY YOUTH FUND PLEASE DO SO. WE NEED YOUR HELP!!

You will find enclosed everything you need to know about camp. Registration forms, schedule, rules, medical forms, packing lists and list of camp officers. *If you have any questions about camp please contact me 901-343-3293*.

**PRAY!!!** Pray for camp, souls to be saved, teens called to ministry, for Jacob & Max, for the camp committee, for churches to have safety during travel to & from camp, and for each church by name!

I look forward to serving as your director this year! In Christ,

## 2021 Mt. Calvary Youth Camp Officers & Staff

Camp Director	Anders Lee 901-343-3293
Assistant Camp Director	Keith Lewis
Camp Registrar	Roger Philips 501-278-1846
Assistant Camp Registrar	Lezza Phillips 601-278-0346
Educational Director	Justin Burdick 601-466-4175
Assistant Educational Director	Chris McVay 870-692-5501

Camp Pastor	Jacob Guenrich
Worship Leader	Max Sullivan
Recreational Director	Scott Smith
Camp Nurse	David Sluder
Lifeguards	Camp Referred Individuals

#### \*Notice:

A nursery will be provided during the evening worship services and we will need volunteers to help. If you would be willing to help, please contact Kelley Lewis or Lezza Phillips.

#### 2021 Mt. Calvary Youth Camp Rules

- 1. Adult sponsors (representatives on behalf of individual churches) must be at least 21-years-old and are required for both boys and girls attending church camp. Stoneridge Camp Rules require a minimum of 1 adult sponsor for each 10 campers of the same sex, for example, a church group must have one sponsor for every 10 campers, if a church group brings 14 female and 9 male campers, there must be a minimum of two female sponsors and one male sponsor. These arrangements must be made before any church group attends camp.
- 2. Every camper must obey camp officials and adult sponsors at all times.
- 3. Reverence is expected during all worship services.
- 4. In the case of an accident, illness, or emergency, campers are required to report to the camp nurse or camp director immediately.
- 5. No camper is permitted to leave the campground boundaries without the permission of their adult sponsor. Wooded areas and trails are considered out of the campground boundaries.
- 6. Clothing Considerations:
  - A. Tank tops, crop tops, spaghetti strap tops, tight fitting body wear, short skirts, short dresses, or short shorts are not permitted at camp!!!
  - B. Offensive or inappropriate advertising, artwork, or wording on clothing articles are not permitted at camp!!!
  - C. GENERAL RULE: Questionable items of clothing that may be offensive to anyone attending camp may be reported to the Camp Director and the person involved will be asked to change clothing. NO QUESTIONS ASKED!!! In other words, "IF YOU ARE IN DOUBT ABOUT WHETHER THE CLOTHING MIGHT BE INAPPROPRIATE, LEAVE IT AT HOME!!!!
- 7. Swimming pool rules and schedule must be obeyed at all times. No cut-off jeans are to be worn as swimwear. Every camper must wear FULL cover-up clothing including shoes, to and from the swimming pool. A TOWEL WRAPPED AROUND THE BODY IS NOT ACCEPTABLE!
- 8. NO TOBACCO PRODUCTS ARE PERMITTED AT ANYTIME, WHICH INCLUDES EVERY CAMPER OR SPONSOR!!!
- 9. Every camper age nine and under must be accompanied by a relative of the same sex 21-years-old or older.
- 10. Every camper is required to attend camp classes, assemblies, worship services, and devotional times unless excused by the Camp Director, Assistant Director, or Camp Nurse.
- 11. Radios, CD Players, Tape Players, etc. are not permitted at camp. Cell Phones will be permitted; however, Cell Phones must not be used during classes, assemblies, or worship services for any reason. Any items will be seized by the Camp Director to be returned at the end of camp.
- 12. Every camper must be in bed and quite after lights out.
- 13. Water guns, water balloons, or shaving cream fights are not permitted with exception of activities organized by the Camp Recreational Director, which must be closely supervised by the Camp Recreational Director and Camp Sponsors.
- 14. All Registrations must be submitted to the Camp Registrar by May 24, 2021

## Instructions for Sponsors

- PLEASE MAKE COPIES AND DISTRIBUTE THESE RULES TO EVERY CAMPER WELL IN ADVANCE OF ATTENDING CAMP.
- EVERY CAMPER MUST KNOW, UNDERSTAND, AND AGREE TO THESE RULES. EVERY CHURCH REPRESENTATIVE WILL BE RESPONSIBLE FOR ENFORCING THESE CAMP RULES. IF ANYONE NEEDS ASSISTANCE WITH ENFORCING THESE RULES, PLEASE CONTACT THE CAMP DIRECTOR IMMEDIATELY. THANK YOU FOR YOUR HELP AND WILLINGNESS TO PROVIDE YOUR TIME TO SPONSOR THE YOUTH.
- > SPECIAL NOTICE: REMINDER THAT THE CAMP DOES NOT PROVIDE PAPER TOWELS, SOAP, TRASH BAGS, OR EXTRA CLEANING SUPPLIES FOR THE BATHROOMS.

## 2021 Stoneridge BMA Camp Sign-Up List & T-Shirt Orders

Deadline: May 24, 2021

Camper's Name	Camper's Last Grade Completed	Camper's Gender	Registration Fee = \$62.00
Church Name:			
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
Totals for this page:			

## 2021 Stoneridge BMA Camp Sign-Up List & T-Shirt Orders

Camper's Name	Camper's Last Grade Completed	Camper's Gender	Registration Fee = \$62.00
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
Totals for this page:			

## 2021 Stoneridge BMA Camp Sign-Up List & T-Shirt Orders

Deadline: May 24, 2021

	Camper's Name	Camper's Last Grade Completed	Camper's Gender	Registration Fee = \$62.00
22.				
23.				
24.				
25.				
26.				
27.				
28.				
29.				
30.				
31.				
	Totals for this page:			
	Totals for all pages: *(If you have more than 31 campers provide totals for all)			

### 2021 Mount Calvary Youth Camp Schedule

## **Monday**

**1:00 – 2:30 -** Registration/Check-In **1:30 – 4:20 -** Free-Time/Recreation

#### **Swimming Schedule for Monday:**

1:45 – 2:45 - All Girls

3:00 - 4:00 - All Boys

4:30 - Counselor Meeting

5:00 - Assembly (Tabernacle)

5:30 - Supper by Assigned Groups (Dining Hall)

7:00 - Church Group Prayer Time

7:20 – Sanctuary Doors Will Open

7:30 – Evening Worship

8:45 - 9:15 - Free Time/Canteen

9:15 - 10:30 - Night Life\*/\*\*Krazy Kids

10:30 - Group Devotionals

11:00 - Campers Report to Cabins

**11:30** – Lights Out

## **Tuesday and Wednesday**

7:30 - Rise and Shine

8:00 – 8:10 – Morning Assembly & Devotion

\*Counselor Meeting Following Devotion

8:15 – Breakfast by Assigned Groups (Dining Hall)

9:45 - Report to Group areas

10:00 - 10:40 - SOAP Time

**10:40 – 11:10 -** Canteen Break

11:10 - 11:50 - SOAP Time

11:50 - Lunch Assembly (Tabernacle)

12:00 – Lunch by Assigned Groups (Dining Hall)

**12:45 – 2:15 -** Free Time/Recreation

#### **Swimming Schedule:**

2:15 - 2:45 - Boys 6th Grade & Under

2:45 - 3:15 - Girls 6th Grade & Under

#### Swimming Schedule:

3:15 - 3:45 - Girls 7th Grade & Over

3:45 - 4:15 - Boys 7th Grade & Over

**4:30** – Scott Smith Game Show (all camp)

5:30 - Supper by Assigned Groups (Dining Hall)

7:00 - Church Group Prayer Time

7:20 - Sanctuary Doors Will Open

7:30 – Evening Worship

8:45 - 9:15 - Free Time/Canteen

9:15 - 10:30 - Night Life\*/\*\*Krazy Kids

**10:30** – Group Devotionals

11:00 - Campers Report to Cabins

**11:30** – Lights Out

## **Thursday**

7:30 - Rise and Shine

8:00 – 8:10 - Morning Assembly & Devotional

\*Counselor Meeting Following Devotion

8:15 – Breakfast by Assigned Groups (Dining Hall)

9:00 – 9:45 - Clean Up, Pack Up, & Load Up 10:00 – Closing Worship Service

Departing from Camp after Worship

#### **Notes:**

#### **Group Devotionals**

Each evening of camp there is a devotional time at 10:30 PM. Each church is responsible to make sure their kids & teens attend. Camp leaders will be on campus making sure no one is roaming around during this time. If the Lord is working in this time, we want you to have the liberty to extend your time frame as you are led. Just be sure that afterwards your group is quiet returning to cabins. Some will have already bedded down lil ones.

#### **Counselor Meetings**

During camp there are four counselor meetings. We need at least one representative from each church to attend each meeting. We will be making announcements during these meetings and if there are any matters to be addressed, they can be discussed in these meetings. Note the times on the schedule.

#### \*Night Life with Anders & Justin

Our Camp Directors will be hosting this event. All campers, grades 6 & up should attend, it's going to be FUN!!! Meet back in the sanctuary for this event. It is understood that each church may need to make their own decision about taking the lil ones, under this age group, back to the cabin and to bed, totally fine if you do! It's gonna be great!!!

#### \*\*Krazy Kids

Kids, grades 3-5 will have organized games at the pavilion, ping pong table area, & in cafeteria.

#### Notice:

The Camp Director may need to make modifications to the schedule once we are at camp and will inform all sponsors in a timely manner.

## PACKING CHECK LIST

Bible									
Pillow									
Twin Siz	ed Sheets, Blankets, or Sleeping Bag								
Towels	& Washcloths								
□ Personal Hygiene Items:									
	Soap								
	Deodorant								
	Body Spray								
	Shampoo								
	Hair Spray								
	Brush or Comb								
	Hair Dryer								
	Toothbrush								
	Toothpaste								
	Sunscreen								
	Insect Repellant								
Trash B	ags or Laundry Bags for Wet Items & Dry Dirty Clothes								
Swimwe	ar and Cover-Up Clothing (See Rule #7)								
\$10-\$20: Howeve	ng Money for Canteen (Sodas, Candy, Snacks, Ice, Etc.) Suggest of Campers are Permitted to Bring Personal Drinks and Snacks; of Campers Must Be Responsible for Storing and Cleaning-Up of emselves.								
□ Recreational Items That You Would Not Mind Sharing With Other Campers									

#### Health History Form for Children, Youth, and Adults Attending Stoneridge BMA Camp

Dates of Camp Attendance: June 7-10, 2021

## THIS FORM MUST ACCOMPANY ANY PERSON ATTENDING CAMP

Developed and approved by: American Camp Association American Academy of Pediatrics

The Information on this form is not part of the camper or sponsor acceptance process, but is gathered to assist us in identifying appropriate care. Health history must be filled out by parents/guardians of minors or by adults themselves. Updated information is required annually.

	(	Please Print	Information)			
Name			Birth Date	_//	Age	at Camp
Last	First	M.I.				
Home Address						
	Street Address		City		State	Zip Code
Social Security Number of	Participant			Gender:	☐ Male	☐ Female
Custodial Parent/Guardian	·			Phone (	)	
Home Address						
(If Different From Above)	Street Address		City		State	Zip Code
Business Address	Charles A I I and		City		State	Zip Code
Additional Contact No. (			usiness Phone (	)	- State	1
	, <del></del>		`	)		Ext
IF NOT AVAILABLE IN		*		DI (		
Name				_ Phone (	)	
Relationship to Camper						
Address						
INSURANCE INFORMA	Street Address TION:		City		State	Zip Code
Is the Participant Covered	by Family Medic	cal/Hospital Ir	nsurance?   Yes	i □ No		
If so, Indicate Carrier or P.		_			roup #	
*Photocopy of front and	d back of Health	ı İnsurance (	ard must be atta	ched to this	form.	
			t be completed			
Parent/Guardian Authorizatio	n: This Health His	tory is correct	In the event I can	anot he reached	l in an emero	ency I hereby
and complete as far as I know		-	give permission t		_	•
has permission to engage in a	-		administrators, and physicians selected by the camp to secure			
noted.	•	•	and administer treatment, including hospitalization, for the			
			person named ab	ove.		
I hereby give permission to the					22.2	
health care, administer prescr			I hereby release t	_		
emergency medical treatment			for any actions ta	iken by them p	ursuant to th	is authorization.
routine tests. I agree to the release of any records necessary for treatment, referral, billing, for insurance purposes. I give			Signature of Pare	ent/Guardian o	r Adult Cami	ner/Staff
permission to the camp to arr		one Guaranan o	r raun cam	SCI Starr		
transportation for me/my child.  Date / /					/	
I also understand and agree to abide by any restrictions placed on my participation in camp activities.						
Signature of Minor Camper o	r Adult Camper/St	aff			Date	//

Name of Family Physician			Phone ( )	
Address				
Street Address		City	State	Zip Code
Name of Family Dentist/Orthodontist				·
			FIIONE ( )	
Address				
Street Address		City	State	Zip Code
HEALTH HISTORY:				
ALLERGIES - List All Known:				
Medical Allergies (List):	Describe Reaction and Ma	nagement of the Reaction:		
Food Allergies (List):	Describe Reaction and Ma	nagement of the Reaction:		
Other Allergies (List) - Include Insect stings	Hay Fayar Asthma Animal Da	ander etc :		
Other Allergies (List) - include insect stings	s, riay i evel, Astillia, Allillai De	ander, etc		
Date of Last Tetanus Shot:/	/			
MEDICATION BEING TAKEN:				
Please list ALL medications (including over-th	e-counter or non-	Keep it in the original	packaging/bottle that identifies th	ie
prescription drugs) taken routinely. Bring enou			ian (if a prescription drug), the na	
the entire time at camp.			ge, and the frequency of administr	
the entire time at camp.		medication, the dosag	ge, and the frequency of administr	ation.
This person takes NO medication on	a routine basis.			
l —				
This person takes medication as foll	ows:			
Med #1		e Frequency		
Reason for taking				
Med #2	_	e Frequency		
Reason for taking				
Med #3		e Frequency		
Reason for taking				
Attach additional pages for more medicat				
Identify any medication taken during the sch	ool year that participant does/ma	y not take during the summer:		
Use this space to provide any additional int			nai, or mental health above whi	cn the camp
should be aware:				