

emergency and medical information

Missing or incorrect information will result in registration forms being sent back

student information: must be filled out by a parent/guardian

Is your student

on any medication or prescription drugs? YES NO If yes, please explain below
in general good health? YES NO If no, please explain below

Does your student

have any medical precautions or physical limitations we should be aware of?
YES NO If yes, please explain below

Please list any medical conditions, precautions or medications we should be aware of:

In signing this form, I hereby certify the information provided is correct and give my child permission for the use of photographs including the named student in work camp publicity; for my child to be transported in privately owned vehicles or Synod contracted vehicles to and from approved work camp and out-of-camp activities; and for the release of medical records in the case of illness or injury. In case of a medical emergency, I understand that every reasonable effort will be made to contact me as the parent/guardian of the child named on this registration form. In the event that I cannot be reached, I hereby give permission to the physician selected by the camp director to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for my child named herein. I understand that if my child is involved in the use of alcohol, drugs, or some other gross infraction of the stated rules, regulations or guidelines, as established by the camp director and leadership, he/she may be sent home at my expense.

Signature of PARENT/GUARDIAN of STUDENT participant DATE

PRINT NAME LEGIBLY

RELATIONSHIP TO STUDENT

CELL PHONE

ALTERNATE PHONE

INSURANCE COMPANY

GROUP NUMBER POLICY NUMBER

ADULT emergency INFORMATION

EMERGENCY CONTACT PERSON

RELATIONSHIP TO ADULT

CELL PHONE

ALTERNATE PHONE

INSURANCE COMPANY

GROUP NUMBER POLICY NUMBER

If there are ANY medical conditions, precautions or medications we should be aware of, please list above in the student section!

his work camp 2010

For further information please contact Synod of the Heartland Youth Ministries office.

712.737.4959

www.synodyouth.org

Kristin Franken – Event Coordinator
kfranken@heartlandsynod.org

Bob Cleveringa – Event Director
bcleveringa@heartlandsynod.org

Synod of the Heartland w 612 8th Street SE w Orange City, IA w 51041

SYNOD OF THE

his work camp 2010
June 19-26 alcoa, tn

Heartland
RCA



awake

missionstatement

HIS Work Camp is a work camp experience offered to high school students and adult leaders who strive to honor God as they serve physically, share their faith relationally and grow spiritually.

location

Alcoa, TN is on the eastern side of the state, located about 20 minutes south of Knoxville. We will be working alongside Appalachian Regional Ministries. ARM responds to the spiritual and physical needs of both families and individuals in the area. This will be our second year partnering with ARM in Tennessee.

What it involves

Each participant will be assigned to a work group. Groups will go to various worksites and complete projects including home repair, roofing, shingling, painting, building and other types of hands-on projects.

Sleeping and eating

Groups will be staying in a local school near Alcoa. Participants will sleep in classrooms and eat in the cafeteria. Meals for the week start on Sunday with breakfast and end with breakfast on Saturday. While travelling to and from Tennessee, lodging and food are the responsibility of each individual group.

Schedule

Saturday June 19

5:00pm-9:00pm Arrive

Sunday June 20

Attend church in the area

Work group orientation

Visit worksites in the area

Monday June 21 - Friday June 25

Groups go to worksites during the day

Evening worship

Large group session

Youth group time

Freetime

Wednesday: Free afternoon with recreation!!

Saturday June 26

8:00am Heading back home



Registration

\$275 Early Bird (February 1 - April 31)

\$300 Regular (May 1- May 31)

Registration opens February 1, 2010 and will be accepted on a first come, first serve basis until May 31, 2010 or until full capacity is reached. NO REGISTRATIONS OR SUBSTITUTIONS will be accepted AFTER MAY 31, 2010.

transportation

Synod bussing is available until April 31 for an additional \$175/person.

All bussing payments must be paid in their entirety when each group signs up for this service. Pick-up points may require minimal travel. Groups that opt out of Synod bussing are responsible for their own transportation arrangements to and from the work camp. If bussing numbers are not adequate, the Synod reserves the right to cancel bussing.

Payment

There are two options for registration payments:

#1 Pay the full registration amount at one time

#2 Deposit \$100 to hold spot. Full registration balance is due by April 31.

If full payment (\$275) is not received by April 31, 2010, regular registration fees will apply (\$300) beginning May 1, 2010.

refunds

Refunds of \$75 will be given until April 31, 2010. NO REFUNDS will be given after April 31, 2010. All bussing payments are non-refundable.

reserving spots

Groups are allowed to reserve spots for a maximum of 4 unnamed participants. No refunds will be issued after April 31, 2010. Completed forms for these participants must be in the Synod office by May 31, 2010; otherwise the spot is no longer available.

Adult:student ratio

Adult to student ratio is 1:7 per gender. It is highly recommended that each group has one or more adults with construction experience or skills! These adults are needed to serve as a site foreman. All other adults will serve as team leaders.

his work camp 2010 registration form

All registration forms must be filled out completely and turned in to your youth pastor/contact leader along with payment (please make checks payable to your church). They in turn will send the entire youth group's forms and payments to the Synod Office.

PLEASE PRINT LEGIBLY

FIRST NAME _____ LAST NAME _____

CIRCLE ONE: Student Adult

BIRTHDATE ____/____/____ AGE ____ GRADE ____ GENDER ____
M D Y

ADDRESS _____

CITY _____ STATE ____ ZIP CODE ____

CELL PHONE _____

EMAIL ADDRESS (yes this is important... and no we won't send you spam) _____

T-SHIRT SIZE: S M L XL 2XL

CHURCH (one you are attending the work camp with) _____

YOUTH PASTOR/CONTACT LEADER _____

Do you have any construction experience? Y / N
If yes, please list your construction experience and/or knowledge that would be helpful in assisting at the work camp:

adult leaders read here!!!

IN ADDITION to filling out this registration form, you have the privilege of filling out a **Skill Assessment Form!** This will help us determine where to place you when we assign worksites. (aka we won't make you foreman of framing a house if the only maintenance you've ever done is run a lawn mower at home!)

Your youth pastor/contact leader has these forms. Please pick up a copy from him/her and turn it in with your completed registration form. We will also make forms available on our web site www.synodyouth.org.