

## Registration Information

**Children's Camp** registration begins on Monday at 1:00 PM. Dismissal is Friday following the noon lunch. For more information contact:

**Mrs. Christinia Blue**  
**(217) 662-6924**  
**E-mail:**  
**[Nanab25@aol.com](mailto:Nanab25@aol.com)**

### *Campers and Parents* *Please Note:*

**What to bring:** Adequate footwear, modest/appropriate swimwear, play clothes, chapel clothes, jacket or sweatshirt, sleeping bags/blankets, twin size sheet to cover mattress, pillow, towels, washcloths, toiletries & shower supplies, flashlight, Bible, writing utensils, notebook, ball glove (boys), camera (optional).

**What not to bring:** Radios, tape or CD players or music that dishonors God or Holy (Godly) living.

**Lost & Found:** MARK ALL OF YOUR CHILD'S BELONGINGS! Lost items not requested within 30 days are disposed of. Campers pay postage on items returned. Camp will not be responsible for lost or stolen items.

**Visitors:** Camping is about fellowship with peers and discovering new things together. Visitors can hinder a camp's effectiveness towards building that togetherness. Therefore, visitors are strongly discouraged. However, if there is an emergency and you must get in contact with a camper you may call Camp Warren, 4225 South Camp Warren Lane, Decatur, IL 62521 (217) 864-9914.

**Medicines:** ANY medications sent to camp **MUST BE** in the original RX bottle with the Physician's name and administration instructions on the bottle. Medications **MUST BE** given to the camp nurse for administration.

## Camp Schedule & Fee

**Children's Camp**  
**July 19-23, 2010**  
**Ages 8-12 \$ 200**

### **Where to Send Registration**

**To register, this completed form along with a \$25 non-refundable deposit must reach**  
**Mrs. Christinia Blue,**  
**5078 Olivet Road,**  
**Georgetown, IL 61846**  
**by July 3, 2010.**  
**No late registrations or walk-ins will be permitted.**

**ILLINOIS DISTRICT**  
**Church of the Nazarene**  
P.O. Box 1054,  
Alton, IL 62002  
Phone: 618-462-4361;  
Fax: 618-462-9255

The Illinois District Church of the Nazarene has a non-discriminating camp policy. No one will be refused admission on the basis of race, creed, color, sex, or national origin.

The Food Distribution Program is available to all eligible participants without regard to race, creed, color, sex, or handicap. Any Person who believes that he or she has been discriminated against in any USDA related activity should write to:  
Secretary of Agriculture, Washington, D.C. 10705

## Directions To Camp Warren

**4225 South Camp Warren Lane**  
**Decatur, IL 62521**  
**(217) 864-9914**

**From Champaign**—Go west on I-72W. Take exit 150 toward Argenta. Turn left onto CR-25S. Turn right onto IL-105. Turn left onto CR-59/2100E. Continue to follow CR-59. Turn left onto US-36. Turn right onto CR-57/2130E/85<sup>th</sup> St/Dalton City Rd. Turn right onto Bentonville Rd. which becomes Whistleville Rd. Turn left onto Camp Warren Rd. Turn left onto Camp Warren Lane. 4255 Camp Warren Lane is on the right.

**From Springfield** — Go east on (I-72 / US-36). Take US-36 E via exit 133A toward Decatur. Turn right on S Widener Ave. Turn left on Firehouse Rd. Turn right on S Long Creek Rd. Turn Left onto Camp Warren Rd. Turn right onto Camp Warren Ln. 4225 Camp Warren is on the right.

**From Effingham** — Go West on IL-32 N/IL-33 W. Turn slight right onto IL-32. Turn right onto IL-16/IL-32/1300 N. Continue to IL-16/IL-32. Turn left onto IL-32/2900 E/N Hickory St. Continue to follow IL-32. Turn left onto IL-121/IL-32. Continue to follow IL-121. Turn right onto CR57. Turn left onto Lehman Rd. Turn right onto Fort Daniel Rd. Turn left onto Camp Warren Rd. Turn left onto Camp Warren Ln. 4225 Warren LN is on the right.

# SUMMER CAMPS 2010

Illinois District Church of the Nazarene

**Camp Warren**  
**4225 South Camp**  
**Warren Lane**  
**Decatur, IL**  
**62521**  
**(217) 864-9914**

[Camp](#)  
[Schedule](#)

Children's  
[Camp](#)

**July 19-23,**  
**2010**



**CAMPER REGISTRATION FORM**

Name: ( Last ) \_\_\_\_\_  
( First ) \_\_\_\_\_ ( Middle ) \_\_\_\_\_  
Sex M \_\_\_ F \_\_\_ DOB \_\_\_/\_\_\_/\_\_\_  
Grade in Sept. \_\_\_  
Parent/Guardian Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_  
Home Ph. ( \_\_\_ ) \_\_\_\_\_  
Work Ph. ( \_\_\_ ) \_\_\_\_\_  
Church I'm coming with \_\_\_\_\_

Church City \_\_\_\_\_ State \_\_\_  
Zip \_\_\_\_\_

Pastor's Name \_\_\_\_\_

Cabin-mate Request \_\_\_\_\_

(One only. Your cabin-mate request must write in your name also.)

Who to call if parent can't be reached \_\_\_\_\_

Relationship to camper \_\_\_\_\_

Home Ph. ( \_\_\_ ) \_\_\_\_\_

Work Ph. ( \_\_\_ ) \_\_\_\_\_

**Medical Information**

Had DPT Immunization? \_\_\_ Yes \_\_\_ No

Last Tetanus Booster \_\_\_/\_\_\_/\_\_\_

Any Allergic reactions? \_\_\_ Yes \_\_\_ No

To what? \_\_\_\_\_

List medications taken regularly. (Parents please note all medications sent with child must be in the original bottle(s)/package(s) with pharmacist's instructions.)  
\_\_\_\_\_  
\_\_\_\_\_

For what? \_\_\_\_\_

Camper's Doctor \_\_\_\_\_

Phone ( \_\_\_ ) \_\_\_\_\_

Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_

Any activity restrictions? \_\_\_\_\_

To register send completed form with registration fee two weeks prior to the camp date. A \$25 dollar fee is assessed for late registrations.

Cabin: \_\_\_\_\_

Counselor: \_\_\_\_\_

*For Office Use only:*

Received \_\_\_/\_\_\_/\_\_\_

Amount \_\_\_\_\_

Check # \_\_\_\_\_

Church Check # \_\_\_\_\_

Initials \_\_\_\_\_

Balance Due \_\_\_\_\_

Receipt # \_\_\_\_\_

Medical Signed  
\_\_\_ Yes \_\_\_ No

Camper's Pledge Signed  
\_\_\_ Yes \_\_\_ No

Off Site Activity Signed  
\_\_\_ Yes \_\_\_ No

Waiver of Claim Signed  
Yes \_\_\_ No \_\_\_

Date Entered \_\_\_/\_\_\_/2010

Initials \_\_\_\_\_

**SIGNATURES REQUIRED**

In case of medical emergency, I hereby give permission to the physician(s) contacted by the camp to hospitalize and secure treatment for my child (named as camper above) including ordering injections, anesthesia, surgery, etc. I also give permission to the Camp Nurse to administer Tylenol and/or cough medicine if required. In addition, I have fully read "Campers and Parents Please Note" in this brochure.

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

Date \_\_\_/\_\_\_/2010

Camper's Pledge: I have fully read and understand the guidelines in the section of this brochure "Campers and Parents Please Note". While a camper I agree to abide by these guidelines as rules for my conduct and encourage my fellow campers to do the same. I understand I can be dismissed from camp for breaking my signed pledge.

Camper's  
Signature: \_\_\_\_\_

Date \_\_\_/\_\_\_/2010

Witnessing Parent/Guardian or Pastor  
Signature: \_\_\_\_\_

Date \_\_\_/\_\_\_/2010

Off Site Activity: I hereby give my permission for my child to participate in any off site supervised scheduled camp activity. I waive any and all claims against the Illinois District Church of the Nazarene, or any of their Boards or Representatives for any injuries to my child that they may incur while participating in the activity or being transported to and from the activity.

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

Date \_\_\_/\_\_\_/2010

Waiver of claim: I waive any and all claims against the Illinois District Church of the Nazarene, or any of their Boards or Representatives of because of injuries or other damages incurred to the campers property in connection with the Children's Camp Program at Camp Warren, 4225 South Camp Warren Lane, Decatur, IL 62521.

Parent/Guardian : \_\_\_\_\_  
Date \_\_\_/\_\_\_/2010

**General Camp Rules**

1. No tobacco, alcoholic beverage, illegal drugs or drug paraphernalia, pornography, weapons, or fireworks are allowed on the campground. The only exception shall be camp sponsored fireworks under the direction of the Camp Director or Camp Caretaker.
2. Profanity will not be tolerated on the campground.
3. During camps or retreats male and female campers (children & teen), are not allowed in each others rooms.
4. Any person or persons that cause damage to property or facilities shall be responsible for the repair and/or cost of repair involved. Parents/ guardians shall be responsible for the acts of their minors.
5. Dress is subject to the Biblical standard of Christian modesty. Undergarments should not be visible at any time. Swimwear should be worn only for designated activities. Requirements are full one piece suits for females or two piece suits will be allowed if a colored t-shirt is worn over the suit. Boxer trunk style or cut off jeans is the styles for males.
6. Shoes must be worn at all times.

**PLEASE MARK THE SIZE TEE SHIRT YOU WILL NEED.**

**Girls & Boys - Child Sizes**

Small \_\_\_ \_\_\_  
Medium \_\_\_ \_\_\_  
Large \_\_\_ \_\_\_  
X-Large \_\_\_ \_\_\_

**- Adult Sizes**

Small \_\_\_ \_\_\_  
Medium \_\_\_ \_\_\_  
Large \_\_\_ \_\_\_  
X-Large \_\_\_ \_\_\_  
XX-Large \_\_\_ \_\_\_  
XXX-Large \_\_\_ \_\_\_