

# 2007 LAMPS



**JAYME**  
Montera

**Junior High**

June 11 - 15  
Grades 6 - 9

**"One Accord"**  
NCU Worship Team

**Senior High**

June 25 - 29  
Grades 10 - 2007 Grad

**KEITH**

Robinson

**"Servant's Heart"**

TBC Worship Team



**Junior / Senior High**

June 18 - 22

Grades 6 - 2007 Grad

**RICK**

Lorimer



**"Servant's Heart"**

TBC Worship Team

**Kids**

#1 July 9 - 13

#2 July 16 - 20

Grades 4 - 6



**JASON**

Noble



**Mark**

Oberbeck

Youth Director



**Heath**

Adamson, Jr & Sr High  
Morning Speaker

# Camp Dates & Speakers

## JUNIOR HIGH

*\*For Students grades 6 - 9*

June 11-15

**Jayme Montera**, Speaker

## JUNIOR/SENIOR HIGH

*\*For Students grades 6 - 2007 Grad*

June 18-22

**Keith Robinson**, Speaker

## SENIOR HIGH

*For Students grades 10 - 2007 Grad*

June 25-29

**Rick Lorimer**, Speaker

## KIDS

*\*For Students grades 4-6*

#1 July 9-13

#2 July 16-20

**Jason Noble**, Speaker

*\*6th Graders can come to either Kids Camp, Junior High Camp or both.*

*\*Students attending the Junior/Senior High Camp can also attend the camp for their age group at the 2nd child rate.*

## Location

The Sunstream Retreat Center is located between Boone and Ogden. Take the gravel road north off of US 30 that is 3 miles east of Ogden and follow the signs. Camp address is: 1130 Juneberry Rd, Ogden, IA 50212.

Please send camp registrations to:

Youth & Education Department  
10525 Buena Vista Ct, Urbandale, IA 50322

# Camp Policies

## DRESS CODE

✓ Shorts may be worn anytime during camp, with the exception of the evening service. All shorts must be modest. Absolutely NO bicycle shorts, athletic shorts, boxer shorts or any shorts shorter than mid-thigh will be permitted.

✓ For evening services young ladies may wear modest dresses, slacks, or nice jeans. Young men may wear dress slacks, pants, or nice jeans. NO SHORTS will be allowed for the evening services.

✓ Abbreviated attire such as belly shirts, tube tops, tank tops / sundresses, spaghetti straps, or similar attire will not be allowed. Shirts and dresses that have ANY part of the back missing will not be allowed. Close-fitting and revealing shirts or pants are not allowed.

✓ Cover clothing must be worn to and from the swimming pool over the swimsuit.

✓ No clothing with inappropriate slogans or advertisements, such as secular music groups, beer companies, etc., will be permitted.

## CAMP REGULATIONS

1. Attendance at all classes and assemblies is required.
2. Prescription medicines must be turned in at registration to the first aid personnel.
3. No camper is permitted to leave the grounds without a written note from a parent.
4. The possession or use of tobacco, illegal drugs, alcohol, or fireworks is sufficient reason for immediate dismissal from camp.
5. Tape or CD players, i-pods, radios, cell phones, pagers, and pets are not permitted at camp.
6. The camp staff reserves the right to inspect the contents of all personal belongings, including backpacks. The holding and / or disposal of improper and illegal contents is the right of the camp staff.
7. All car keys of campers must be turned in to the camp director at registration.
8. Only the parent who signed the camper's form will be allowed to check out a camper early, or take them to and from an appointment during camp.

# Tuition

Camp tuition includes: lodging, meals, all recreation and many other incidental expenses.  
ALL CAMPS (early bird rate) \$116.00  
(regular rate) \$126.00

A \$5.00 family discount will be given for the second child to attend; \$10.00 family discount for the third child to attend; \$15.00 family discount for the fourth child and all others who attend from the same family.

**A \$20 deposit must accompany registration form and is non-refundable.**

**REGISTRATION DEADLINE:** At the district office 21 days before camp begins (to get early bird rate).

**REGULAR CAMP TUITION:** \$126.00 if received less than 21 days prior to camp beginning.

*Acceptance and participation is the same for everyone without regard to race, color, national origin, gender, religion, age, disability or political beliefs.*

# What To Bring

- ♦ Bedding for a single bed (Either covers or sleeping bag)
- ♦ Pillow
- ♦ Towels / Washcloths
- ♦ Soap
- ♦ Shampoo
- ♦ Swimsuit
- ♦ Bible
- ♦ Pen
- ♦ Notepad
- ♦ Toothpaste
- ♦ Toothbrush
- ♦ Rain gear
- ♦ Camera / film
- ♦ Alarm Clock
- ♦ Spending Money

# Sign-in / Dismissal

Registration begins at 9:30 AM on Monday. Camp ends at 12:00 noon on Friday.

# Visitor Policy

For the protection of all campers, **NO VISITORS** (other than parents and pastors) will be allowed. Camp Phone: (515) 275-2117 (emergencies ONLY please). It is recommended that parents refrain from visits. A short visit will promote homesickness instead of help.

# Important Info

**MONEY:** There is a snack-shop and a camp store with T-shirts and small toy items available for sale.

**MEDICATION:** All prescriptions brought to camp must be brought in their prescription bottle or container.

# 2007 CAMP REGISTRATION

All registrations **MUST** be sent through your local church. Do not mail to us without going through your church Coordinator.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Male  Female Grade (Fall 2007) \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age at camp \_\_\_\_\_

Address \_\_\_\_\_

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

Church Name \_\_\_\_\_ City \_\_\_\_\_

Pastor's Signature

**Mark week you will attend**

Junior High June 11-15       Kids #1 July 9-13

Junior/Senior High June 18-22       Kids #2 July 16-20

Senior High June 25-29

\$116.00      Early Bird Rate  
\$126.00      Regular Rate

*This section to be completed by PARENT / GUARDIAN. Must be complete and accurate!*

## STATEMENT OF HEALTH

Parent / Guardian Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Second Emergency Contact Name: \_\_\_\_\_ Home Ph: \_\_\_\_\_ Cell \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Subscriber's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Employer: \_\_\_\_\_

Date of last Tetanus: \_\_\_\_\_ Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

History of:     Seizures     Heart Trouble     Diabetes     Kidney     Bowel Habits     Bleeding  
 Surgeries     Menstrual Problems     Sleepwalking     Bedwetting     Headaches     Lung or Breathing Problems

**ALLERGIES:**     Hay Fever     Asthma     Bee Stings     Plants     Foods     Medications \_\_\_\_\_

Explanation for checked items: \_\_\_\_\_

\_\_\_\_\_

Restricted Activities: \_\_\_\_\_

Known to be a carrier of any contagious or infectious disease? \_\_\_\_\_ Please explain: \_\_\_\_\_

Known behavioral or psychological problems or disorders: \_\_\_\_\_

Any known problems with lice in the last 6 months? \_\_\_\_\_

Current Medications: List all medications to be administered at camp. \_\_\_\_\_

\_\_\_\_\_

All medications must be in original container and clearly labeled: patient's name, name of medication, prescription number, date prescribed, instructions.

Other health information we should know: \_\_\_\_\_

\_\_\_\_\_

*I have read and will abide by all camp rules and regulations.*

*Camper's signature:*

**FAMILY RATE:** If someone from your family has already attended a camp this summer (or this same week), please check one:

	Early Bird Rate	Regular Rate
I am the: <input type="checkbox"/> Second	111.00	121.00
<input type="checkbox"/> Third	106.00	116.00
<input type="checkbox"/> Fourth or more	101.00	111.00

Pre-Paid Camp DVD \$12.00      \$ \_\_\_\_\_

Pre-Paid Camp T-Shirt \$12.00      \$ \_\_\_\_\_  
*(\$15.00 on site)*

**SIZE:**     Kids 10-12     Adult Small  
                   Adult Med     Adult Lg  
                   Adult XL     Adult XXL

Registration Deposit \$20.00      \$ \_\_\_\_\_  
*(Minimum: Non-Refundable)*

Total Enclosed      \$ \_\_\_\_\_

**DEADLINE:** To receive the "early bird" rate of \$116.00, registrations must be received 21 days prior to camp beginning. All others, plus walk-ons, will be charged the regular rate of \$126.00.

Make checks to: *Iowa Ministry Network*  
10525 Buena Vista Ct, Urbandale, IA 50322

**PARENTAL AUTHORIZATION:** The "Statement of Health" listed on this sheet is correct as far as I know and the camper listed on this form has permission to engage in all prescribed activities except noted by me. I give my permission for the camp nurse to treat the listed camper in the event of a minor illness or minor injury. IN CASE OF EMERGENCY, and when I am unable to be contacted, I hereby give permission to the local physician selected by the camp to hospitalize, secure proper treatment for, order injection, anesthesia, or surgery for my child. **Camp counselor refers to "a person in charge of a group of children at camp" and does not imply they are licensed to give counsel. Permission is given to Iowa Ministry Network to use photographs of my child for the camp video and/or future promotional purposes.**

Signed:  \_\_\_\_\_ Relationship \_\_\_\_\_ Date: \_\_\_\_\_