



Missionary Church ECR Kid's Kamp  
1509 West Main Street  
Troy, Ohio 45373  
(937)339-0015

Dear Pastor/Children's Worker,

We hope you are gearing up for a remarkable summer of ministry including our annual regional Kid's Kamp, scheduled for **June 22-27, 2024**.

Your help is needed to make sure Kid's Kamp registrations are processed in a timely manner. Children are encouraged to register through their local church, which makes your role as point person critical. Attached is your Kid's Kamp registration packet. Please look it over closely and make the necessary number of copies for the children completing grades 3-6 in your church. Just a reminder, children of regional pastors are able to attend camp free of charge. Simply mark the child's name with a "PK" on the registration form so we know they are coming for free.

Please collect all the registration forms and send them in together, along with the church registration form and **one** check from your church for the total amount, made payable to **Missionary Church ECR (Children)** by the pre-registration deadline of **Tuesday, June 4, 2024**. Registrations received after Tuesday, June 4, 2024, will be accepted only if space is available.

**Important change:** Children will need to pay the non-refundable \$75 to be considered registered. There will be an additional fee for those paying online. Registrations may be done online and a check mailed to the address below to avoid this bank fee.

**Please send your completed forms to:** Missionary Church Kid's Kamp, 1509 West Main Street, Troy, OH 45373

Your Kid's Kamp Registration Packet includes:

- |  |   |
|--|---|
| <input type="checkbox"/> Church Registration Forms               | <input type="checkbox"/> Medical Authorization Form |
| <input type="checkbox"/> Letter to Parents of Children           | <input type="checkbox"/> What to Bring to Camp      |
| <input type="checkbox"/> Kid's Kamp Individual Registration Form | <input type="checkbox"/> Kid's Kamp Poster          |
| <input type="checkbox"/> Medical Release/Parent Consent Form     | <input type="checkbox"/> Kid's Kamp Flyer           |

Our rally speakers for Kid's Kamp will be a father/daughter team, Robbie & Sadie Sondag. Robbie & Sadie bring a great deal of fun and energy to the rallies, providing a mix of comedy and drama and a solid challenge from God's Word. This year's theme is *"That's Not Fair!"*

On Thursday, June 27, we want to invite you, along with parents of children, to the last session of camp so that you can see what the children have enjoyed throughout the week, and also give you a chance to interact with the children before leaving the grounds. The last session will begin at 9:45 am in the Tabernacle. We would love to have you join us.

We would appreciate your prayers as the regional Children's Ministries Committee prepares for camp, and looks forward to the opportunity to minister to the children in your church this summer.

In His Service,

Jeff Gerig, Kid's Kamp Director  
Children's Ministries Committee



*Please note under "WHAT TO BRING TO Kid's KAMP" the recommended type of container we are asking children to use is in place of a suitcase or bag.*

**Arrival Time and Registration: Saturday, June 22 from 2:00 - 3:00 pm**

**Dismissal Time: Thursday, June 27 at 11:00 am**

# Church Registration Form KID'S KAMP

Church: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Children's Director: \_\_\_\_\_ Email: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

## EARLY REGISTRATION

**\$175**

(or \$75 non-refundable deposit,  
\$100 balance due upon arrival)  
Postmarked by June 4, 2024

## LATE REGISTRATION

**\$200**

Total amount due after June 4, 2024

Amount Paid	Number of Boys	Number of Girls	Total Number Attending	Total
\$75 Deposit (non-refundable) June 4	List names on form.	List names on form.		\$ _____
\$175 Full Payment Postmarked by June 4	List names on form.	List names on form.		\$ _____
Enclose only <b>ONE</b> check made payable to: <b>Missionary Church ECR (Children)</b>			<b>Total Amount Enclosed</b>	\$ _____
Send to: Missionary Church Kid's Kamp 1509 West Main Street Troy, OH 45373				



## T-Shirt Order

Child Size:  
 \_\_\_\_\_ 6-8    \_\_\_\_\_ 10-12    \_\_\_\_\_ 14-16

Adult Size:  
 \_\_\_\_\_ S    \_\_\_\_\_ M    \_\_\_\_\_ L    \_\_\_\_\_ XL

Total Shirts Ordering: \_\_\_\_\_

*Be sure to enclose your Church Registration Form, Individual Registration & Medical Release Forms, Medical Authorization Form and a check payable to Missionary Church ECR (Children). Early registrations must be postmarked by Tuesday, June 4, 2024.*

## Church Registration Form KID'S KAMP

Check appropriate box under the **Amount Paid** column for each child you list.

Amount Paid		Names of Boys
\$75 Dep	\$175 Paid	
		1.
		2.
		3.
		4.
		5.
		6.
		7.
		8.
		9.
		10.
		11.
		12.
		13.
		14.
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		16.
		17.
		18.
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		20.
		21.
		22.
		23.
		24.
		25.
		26.
		27.
		28.
		29.
		30.

Amount Paid		Names of Girls
\$75 Dep	\$175 Paid	
		1.
		2.
		3.
		4.
		5.
		6.
		7.
		8.
		9.
		10.
		11.
		12.
		13.
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		20.
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		24.
		25.
		26.
		27.
		28.
		29.
		30.



Missionary Church ECR Kid's Kamp  
1509 West Main Street  
Troy, Ohio 45373  
(937)339-0015

Dear Parents,

We hope you are gearing up for a remarkable summer which includes our annual regional Kid's Kamp, scheduled for June 22-27, 2024. Kid's Kamp has proven to be a life-changing event for children and where many make their first decision to follow Jesus.

To help you in signing up your children, please pay special attention to the following...

- Please fill out all the necessary information on the Kid's Kamp Registration and **return all completed forms to your church's Kid's Kamp representative**, along with the \$175 registration fee. You may pay a \$75 non-refundable deposit with the remaining \$100 due upon your child's arrival to camp, if you choose. Your child will not be considered registered without paying at least the \$75 non-refundable fee by the pre-registration date. A t-shirt is included in the price, so please don't forget to mark a t-shirt size for your child. Registrations can also be done by using the QR code below or through our website at [www.mcecr.org](http://www.mcecr.org), click on the Events tab, then scroll to Children's Ministries. **Please Note:** There is an additional fee for paying online. Registrations may be done online and check made payable to Missionary Church ECR (Children) mailed to address above to avoid this bank fee.
- Please complete the Medical Release/Parental Consent form in its entirety.
- Please return your forms to your church's Kid's Kamp representative**, along with your registration payment by the deadline set by your local church. Registrations postmarked after June 4, 2024, will be charged an additional \$25. (The total for a late registration is \$200.)

Our rally speakers for Kid's Kamp will be a father/daughter team, Robbie & Sadie Sondag. Robbie & Sadie bring a great deal of fun and energy to the rallies, providing a mix of comedy and drama and a solid challenge from God's Word. This year's theme is *"That's Not Fair!"*


On Thursday, June 27, you are invited to our last rally in the Tabernacle, so you can see what the children have enjoyed during the week, and also give you a chance to interact with your children) before leaving the grounds and jumping right back into your busy schedule. The last session will begin at 9:45 am in the Tabernacle. We would love to have you join us.

We are excited to have the week to minister to your child(ren). We pray that each child who attends will come home having met Jesus in a new and life-changing way.

In His Service,

Jeff Gerig, Kid's Kamp Director





To send mail to your child during Kid's Kamp, please use the following address:

Ludlow Falls Camp - Kid's Kamp  
[Child's Name]  
2535 South State Route 48  
Ludlow Falls, Ohio 45339

**Arrival Time and Registration: Saturday, June 22, from 2:00 - 3:00 pm**

**Dismissal Time: Thursday, June 27 at 11:00 am**

# Individual Registration Form

## KID'S KAMP → June 22-27, 2024

Name: \_\_\_\_\_  
(Last Name) (First Name)

Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)

Phone Number: \_\_\_\_\_  
(Area Code)



Circle one, indicating if your child is a:    BOY            GIRL

Child's Age : \_\_\_\_\_ Grade your child has just completed: \_\_\_\_\_

Church your child attends [if applicable]: \_\_\_\_\_

Please indicate which child(ren) your child would like to room with for the week.

1. \_\_\_\_\_ 2. \_\_\_\_\_

Every effort will be made to meet your request; however, the camp administration reserves the right to make final roommate selections. Attempts will be made to house children in grades 3 & 4 separately from those in grades 5 & 6.

SEMINAR ELECTIVES: Mark your 1st & 2nd choices in both Project Electives & Ministry Electives

***Project Electives:***

**mark two**  
 1 – first choice  
 2 – second choice

- Archery             Arts & Crafts             Cooking
- Woodworking

***Ministry Electives:***

**mark two**  
 1 – first choice  
 2 – second choice

- Choir             Drama             God Around the World (Missions)
- Sign Language             Time with God

If you are going away from home during camp, please let us know how to reach you in case of an emergency, and please write down the name of the person who will be picking up your child after camp, if you will not be the one coming to get your child.

I will not be home during the week of camp, but you can contact me at: \_\_\_\_\_

Name of the person picking up your child: \_\_\_\_\_

## MEDICAL RELEASE/PARENTAL CONSENT FORM

Name \_\_\_\_\_ Grade Completed \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
(Street) (City) (State) (Zip) (Area Code)  
Father's Work Phone Number \_\_\_\_\_ Mother's Work Phone Number \_\_\_\_\_  
(Area Code) (Area Code)

### IN CASE OF AN EMERGENCY AND PARENTS CANNOT BE REACHED, PLEASE CONTACT:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship to Your Child \_\_\_\_\_  
(Area Code)

### MEDICAL INFORMATION [must be filled out completely]

- List all known allergies: \_\_\_\_\_  
\_\_\_\_\_  None
- Date of last tetanus shot or Dtap: \_\_\_\_\_
- Do you give permission for the camp nurse to administer over-the-counter Tylenol or allergy medications to your child? **YES NO**
- Complete the medication authorization form for any daily medication or vitamin that the camp nurse is to administer. [See second page]
- Please state any physical and/or emotional concerns that the camp staff should be aware of to prepare accordingly. \_\_\_\_\_  
\_\_\_\_\_  None

### MEDICAL RELEASE STATEMENT:

The undersigned does hereby give permission for our (my) child, \_\_\_\_\_, to attend and participate in the East Central Region's **2024 Kid's Kamp** program at Ludlow Falls Camp.

We (I) authorize an adult, in whose care the minor has been entrusted, to consent to the below, pending a phone call to us: X-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of, any physician, dentist, or medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

The undersigned shall be liable and agree to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization. Should it be necessary for our (my) child to return home due to medical reasons or otherwise, the undersigned shall assume all transportation costs.

In the event that (child's name), \_\_\_\_\_, is in need of medical attention, I hereby release the Children's Ministries Committee of the Missionary Church of any legal responsibility, and do hereby authorize the staff to make any decision they deem necessary regarding competent medical and hospital treatment, if parent or guardian cannot be immediately reached.

Hospital Insurance (circle one): **YES NO** Person Holding Insurance For This Child \_\_\_\_\_

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

Child's Physician \_\_\_\_\_ Phone Number \_\_\_\_\_  
(Area Code)

\_\_\_\_\_  
*Father's Signature* Date \_\_\_\_\_ or \_\_\_\_\_  
*Mother's Signature* Date \_\_\_\_\_

**Legal Guardian's Signature** \_\_\_\_\_ Date \_\_\_\_\_

# Medication Authorization Form

Name \_\_\_\_\_ Age \_\_\_\_\_ Date \_\_\_\_\_

*Parent/Guardian,*

*Choose a section that applies to your situation and fill in all spaces. Then, sign and date the form and send it in along with the medication in it's original container.*

## Part I: Prescription Medication

For a Parent/Guardian request of administration for Prescription Medicine from a pharmacy, please complete the section below.

Name of Item of be Administered \_\_\_\_\_

Dosage \_\_\_\_\_ Times of Dosage \_\_\_\_\_

Specific Instructions for Administration \_\_\_\_\_

Possible Side Effects \_\_\_\_\_

Expiration Date of This Request \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Phone No. \_\_\_\_\_

## Part II: Non-Prescription Medication

Fro a Parent/Guardian request of administration of over the counter, non-prescription medicine, please complete the section below.

Name of Item of be Administered \_\_\_\_\_

Dosage \_\_\_\_\_ Times of Dosage \_\_\_\_\_

Specific Instructions for Administration \_\_\_\_\_

Possible Side Effects \_\_\_\_\_

Expiration Date of This Request \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Phone No. \_\_\_\_\_

# WHAT TO BRING TO Kid's KAMP:

What will my child(ren) need to bring to camp?

- PLEASE NOTE:** To help prevent the spread of unwanted parasites such as bed bugs, we recommend campers bring belongings in an air tight tub (such as Rubbermaid or Sterilite) rather than a suitcase or bag.
- Sleeping bag
- Pillow
- Towels, washcloths
- Toothbrush, shampoo, soap, etc.
- Casual clothes
- Old shorts, shirt and shoes for water games (eg. water shoes)
- Swimsuit (one piece or modest tankini [no stomach showing] suits for girls, please)
- Sunscreen
- Water Bottle
- Flashlight
- Plastic bag (for wet clothes)
- Bible, pencils, pen, notebook
- Hat or ball cap
- A Can Of Good Insect Repellent**



# WHAT NOT TO BRING:

What should my child(ren) not bring to camp?

Additional money

Inappropriate clothes (modest shorts and T-shirts with no offensive words/graphics would be appropriate)

Cell phones, DS games or other electronic devices that could be lost or damaged

Food/snacks (attracts unwanted animals)