

## CAMPER INFORMATION

Camper Name: \_\_\_\_\_  
 Male  Female Previous Camper:  Yes  No  
 Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Age (by camp): \_\_\_\_\_ Grade (this fall): \_\_\_\_\_  
 School Attending (this fall): \_\_\_\_\_  
 Church you most regularly attend: \_\_\_\_\_  
 Birthday: \_\_\_\_\_ Ethnicity: \_\_\_\_\_  
 How did you find out about Shiloh?  
 \_\_\_\_\_

## PARENT/GUARDIAN INFORMATION

Name: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_  
 Pager/Cell Phone: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

In the event that a parent/guardian cannot be reached.

1. Name: \_\_\_\_\_  
 Relationship to child: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_  
 Pager/Cell Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_  
 Relationship to child: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_  
 Pager/Cell Phone: \_\_\_\_\_

## AUTHORIZED PICK-UP LIST

Please provide Shiloh with a list of authorized adults who can drop off/pick up your child should you not be available.

1. Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_

CONTINUED ↗

## MEDICAL INFORMATION

Can camper fully participate in the active camp program?  
 Yes  No If no, please explain: \_\_\_\_\_  
 \_\_\_\_\_

Does the camper have any of the following conditions?  
 Please check all that apply:

- Asthma  
 Does camper use an inhaler?  Yes  No
- Seizures/Convulsions  
 Blood or clotting disorders  
 Seasonal allergies  
 Diabetes  
 Hyperactivity - ADD or ADHD

Other behavior problems or medical conditions:  
 \_\_\_\_\_  
 \_\_\_\_\_

Anything that we should know to help us get to know your child:  
 \_\_\_\_\_  
 \_\_\_\_\_

Is your child allergic to any medications?  
 Yes  No Please list:  
 \_\_\_\_\_

Is your child allergic to any foods?  
 Yes  No Please list:  
 \_\_\_\_\_

A registered nurse is on staff to administer prescription and nonprescription medication to your child. Please send any prescription medication in the **original containers** including the child's name, name of the medication and the times the child takes the medication on the label. Non-prescription or over-the-counter medication (ex. Tylenol, Advil, Pepto-Bismol, Benedryl, cough syrup, etc.) may be given by the nurse only as needed.

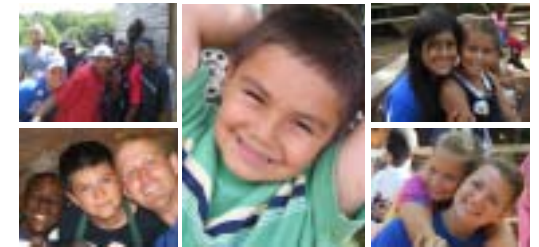
*Transforming our inner-city with the love of Christ through sports, arts, and meaningful relationships.*

# SHILOH

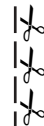
Summer Camp



Send your child to the greatest Christian day camp in Oklahoma City! Enclosed is everything you need to get your child or youth group registered for a week they'll never forget!



**Shiloh Summer Camp**  
 601 NE 63rd St.  
 Oklahoma City, OK 73105  
 (405) 858-7011  
 www.theshiloh.net  
 info@theshiloh.net



**IMPORTANT INFORMATION  
FOR PARENTS, GUARDIANS, AND GROUP LEADERS**

*Please keep this section for future reference!*

**NEW CAMP SCHEDULE**

<b>Monday</b>	9 am to 5:30 pm
<b>Tuesday</b>	9 am to 5:30 pm
<b>Wednesday</b>	9 am to 5:30 pm
<b>Thursday</b>	9 am to 5:30 pm
<b>Friday</b>	9 am to 8:30 pm

At **5:30 pm on Friday**, campers' families and friends are invited to Shiloh for dinner, the camper talent show and the closing service!

**VERY IMPORTANT INFORMATION!**

- Please make every effort to have your child here at 9 and leave them at camp until the day ends at 5:30.
- Campers will not be accepted throughout the week. **If they are not at Monday's registration, they will not be allowed to come to camp.**
- **You (or someone on your Authorized Pick-Up list) must sign your child in every morning and out every evening.** If you must pick your child up during the day, sign them out at the camp office before leaving.
- You do not need to send your child with anything when they come to Shiloh! Just have them wear comfortable clothing and comfortable shoes; modest clothing appropriate for a Christian environment. No flip-flops or strapless shoes allowed.
- Please do not allow your child to bring a cell phone to camp. If they need to use a phone, they can use the camp office phone.
- Shiloh cannot provide transportation.

**Space is limited, so register soon! Once we have your application, we will send you a confirmation post card to let you know that your child's spot has been reserved!**

We are so excited your child will be spending a week at Shiloh this summer! See you soon!

**Questions? Call Shiloh at 858-7011.**

# What is Shiloh?



Shiloh is a day camp serving nearly 500 inner-city youth from Oklahoma City in a fun, high energy, adventure-filled week on forty beautiful acres right in the heart of the city. The camp hosts children ages 8 - 16 years of age, with 4 weeks for ages 8 to 11 and 2 weeks for ages 12 -16.

Campers are divided by age and gender into family groups which are led by a pair of caring mentors who oversee group dynamics, encourage campers to get to know each other, and who take the group to each class throughout the day. Classes are taught by young adults who have a particular gifting for the activity.



- Camper classes include:
- |                             |                          |
|-----------------------------|--------------------------|
| <b>basketball</b>           | <b>archery</b>           |
| <b>fishing</b>              | <b>photography</b>       |
| <b>horsemanship</b>         | <b>pottery</b>           |
| <b>mountain biking</b>      | <b>painting</b>          |
| <b>flag football (boys)</b> | <b>dance (girls)</b>     |
| <b>low ropes course</b>     | <b>high ropes course</b> |

Each day at Shiloh, begins and ends with time in the Amphitheater during which campers and leaders play games, watch skits, and listen to a message about the love of God. This time is very important because it allows campers to talk about the day, the message, or if something is going on in their lives.



A camp week is Monday through Friday, 9 am to 5:30 pm. Friday evening ends around 8:30 pm because of dinner and closing service.

**Transportation is not provided.**

Cost is \$20 per camper if you register **before** the deadline (\$30 per camper after the deadline). This price provides each camper with a small 'dry' breakfast (poptarts or a cereal bar), lunch, and a snack every day, as well as a t-shirt, water bottle, Bible, camp souvenir and a backpack full of school supplies. Dinner on Friday is also covered in the price and campers' families are invited to join us.



Shiloh Summer Camp is the perfect opportunity for kids who want to experience a summer they'll never forget! Send your child's registration information in today!!

**CAMP DATES 2010**

Check the box of the week your child will attend.

Session	Date	Age	Application	
			One session per child.	
<input type="checkbox"/> Session 1	June 7 - 11	12 - 16	<b>May 10</b>	
<input type="checkbox"/> Session 2	June 14 - 18	8 - 11	<b>May 17</b>	
<input type="checkbox"/> Session 3	June 21 - 25	8 - 11	<b>May 24</b>	
<input type="checkbox"/> Session 4	July 12 - 16	8 - 11	<b>June 14</b>	
<input type="checkbox"/> Session 5	July 19 - 23	8 - 11	<b>June 21</b>	
<input type="checkbox"/> Session 6	July 26 - 30	12 - 16	<b>June 28</b>	

**Cost is \$20 per child before the deadline. If space is available after the deadline, the cost is \$30 per child.**

**INFORMATION/MEDICAL RELEASE**

I hereby grant Shiloh Summer Camp of Oklahoma City, its nominees and agents, unlimited permission to use, publish, and republish for purposes of advertising and trade and for such uses as it may determine, information and reproductions of my child's likeness (photographic or otherwise), my child's voice, and my child's statements related to his/her involvement as a Shiloh camper or related to the assistance he/she has received from Shiloh or any of its partner agencies, with or without identification of the child by name. I understand that my child's likeness, voice and/or statements could be used in or on, but not be restricted to, pamphlets, posters, booklets, brochures, radio or television advertising, promotional videos, and other forms of printed, video, or audio material. I, as the child's parent or guardian, waive any right to prior approval for use of any likeness of the child, their voice, or statements associated with the matters covered by this release. I further waive any claim for compensation of any kind or nature for the use of any likeness of the child in my care, their voice, or statements associated with the matters covered by this release.

I hereby grant Shiloh Summer Camp of Oklahoma City, its nominees and agents unlimited permission to release my child's contact information (being address and phone number) with the purpose of recommending the child to a mentor or after-school program.

For the year June 1, 2010 through May 31, 2011, I do hereby release, forever discharge and agree to hold harmless Shiloh Summer Camp Inc. and Eagle Ridge Institute (hereinafter "Shiloh" and "ERI") and any and all directors thereof from any and all liability, claims or demands and expenses of any nature whatsoever which may be incurred by the undersigned participant that occur while participating in any Shiloh/ERI activity or workday, so long as prudent and reasonable care has been maintained and Shiloh/ERI is not solely negligent. I do hereby grant permission of Shiloh/ERI directors or staff to take said participant to a physician or hospital, and hereby authorize medical treatment including but not in limitation to any x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital care. The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with such medical services rendered under this authorization.

Signature of parent/guardian \_\_\_\_\_  
Date \_\_\_\_\_