

How to Get There

Timberlake Ranch Camp
2709 North S Road; Marquette, NE 68854
(308) 946-3871



Grace Baptist Church of Papillion, Nebraska

Attn: Sam Nocita
205 East Halleck Street
Papillion, NE 68046
402-331-5984
Email: Sam@gbcyouthgroup.org

Detach and return to Grace Baptist Church of Papillion

2011 Youth Camp Registration

June 6—June 10, 2011 at Timberlake Ranch Camp, Marquette, NE

Name of Camper _____ Phone (____) _____

Address _____

City / State / Zip _____

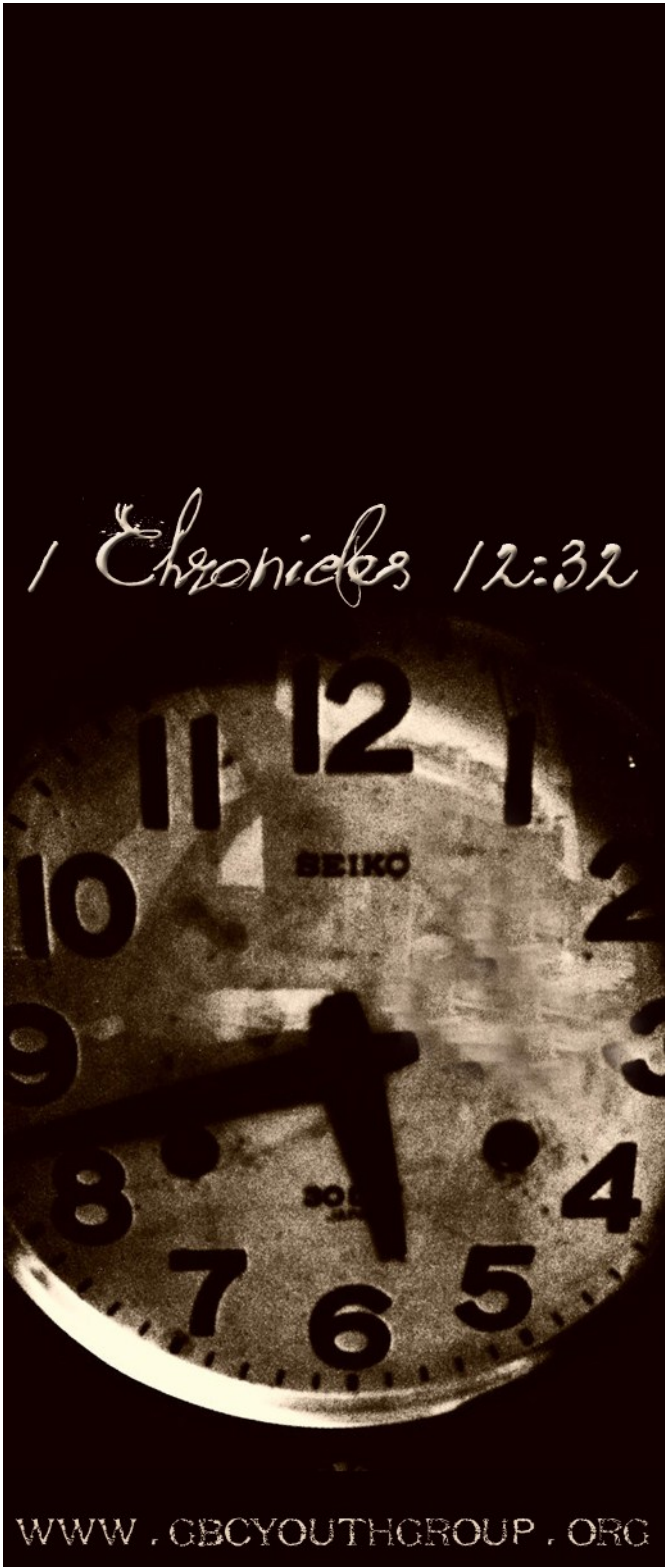
Age at time of Camp _____ Last School Grade Completed _____

Parent's /Guardians Name(s) _____

Parent/Guardian's Signature _____

I can be available to help drive or would like to go as a sponsor:

____ Drop campers off on 6/6 _____ Pick campers up on 6/10 _____ Both _____ Sponsor



WWW.GBCYOUTHGROUP.ORG

When & Where?

June 6—June 10, 2011

Timberlake Ranch Camps—Marquette, Nebraska

Depart from Grace Baptist Church at Noon on June 6!

Participants stay at the camp and will return to Grace Baptist Church in Papillion, NE around Noon on Friday, June 10th

Who Should Attend?

- Youth who have completed 7th Grade
- Youth who desire to know & grow in Christ
- Adults who desire to disciple and mentor Youth



Registration & Costs

COST: \$200* All meals, resources and activities included

Complete the registration & medical information form
Return completed form to Grace Baptist Church of Papillion

*Discounts for multiple members attending from same family

What Should I Bring?

- Bible, Notebook, Pens, Flashlight, Spending \$
- Changes of clothing (no laundry facilities)
- Modest Swimwear, sunscreen, bug spray
- Bedding & Towels (sleeping bag & pillow)
- Personal Hygiene Items
- A sweet, teachable spirit AND a good attitude
- Optional: camera, fishing pole (license if 16 or older)

Do not bring: electronics, firearms, fireworks, alcohol, tobacco



What Activities are Available?

- Small & Large Group Discussions
- Quiet Time Devotion
- Obstacle Course (Low Ropes)
- High Ropes Course
- Rock Climbing Wall
- Power Pole Challenge
- Rappelling
- Paddle Boats & Canoes
- Swimming
- Water Slide
- "The Blob"
- Horseback Riding
- Trail Rides
- Hiking & Exploring
- Volleyball & Basketball
- Ping Pong
- Shuffleboard
- Campfires
- Board Games



MEDICAL RELEASE FORM for REGISTRANT ON REVERSE

** Attach a copy of your insurance card!

Is Camper currently taking medicine or treatment? yes no Restricted from sports/swimming? Yes no
If yes, list medications and /or restrictions: _____

Date of last Tetanus Toxoid Immunization: Month ____ Year ____

Has camper ever had a severe reaction to a bee/hornet sting or insect bite? If yes, explain _____

Does camper have:

Sinus Trouble Hay Fever Asthma Food _____ Drug _____
Heart Trouble Diabetes Epilepsy Other Medical Needs: _____
List any Allergies: _____

Communicable diseases? If yes, please explain _____

EMERGENCY MEDICAL AUTHORIZATION

In the event of an emergency, I hereby give permission to the church sponsors with my child, present at the above mentioned event to obtain medical assistance for my child. I also give permission to the Physician selected to hospitalize and secure proper treatment for my child.

Parent/Guardian Signature _____

Insurance Company _____

If I cannot be reached, please notify _____

Today's Date _____

Policy Number _____

Phone (____) _____

Alternate Phone (____) _____