![A picture containing diagram

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**REGISTRATION INFORMATION**

**Name**

**He/Him**\_\_\_\_\_ **She/Her**\_\_\_\_\_ **They/Them** \_\_\_\_\_\_\_\_\_\_

**Address** **City**  **Zip** \_\_\_\_\_\_\_\_\_\_\_

**Camper’s Cell** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Church Membership**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Birth Date** \_\_\_\_\_\_\_\_\_\_\_ **Age** \_\_\_\_ **Grade (2022-2023)** \_\_\_\_\_ **School**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Camper’s E-mail address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s Email address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s** **Cell #** **Mom**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Dad**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**My First Choice of Work Site:**  **\_\_\_\_painting \_\_\_\_roofing \_\_\_\_carpentry**

*Note: All work assignments will be at the discretion of the Camp Director.*

**Adult T-Shirt Size:** (circle one) S M L XL 2XL 3XL

**Child T-Shirt Size:** (circle one) S M L XL

**Provide a Service Hour Certificate**\_\_\_Yes \_\_\_ No

**PERMISSION GRANTED TO**

|  |
| --- |
|  |

**RELEASE PHONE NUMBER FOR CAMP ROSTER**

**YES NO**

**RELEASE ADDRESS FOR CAMP ROSTER (INCLUDES E-MAIL ADDRESS)**

**YES NO**

**RELEASE ANY & ALL PHOTOS TAKEN DURING CAMP FOR FUTURE PUBLICITY, GRANT REPORTS, FACEBOOK**

**YES NO**

# NOTE: IF ANY OF THE ABOVE THREE STATEMENTS ARE NOT MARKED “NO”, YES WILL BE ASSUMED! Release of Liability

**I understand that the *Loving Neighbors Mission Camp*, a housing rehabilitation project, is physically demanding. I recognize the risk of injury by participating in this event. I understand that I must assume the risk of injury and any related financial responsibility that could result from participating in these activities. I release the Elizabeth River District Office of the United Methodist Church, *Loving Neighbors Mission Camp*, the participating churches, staff members, directors, and volunteers from all liability for any injury occurring while participating in any activities held during the *Loving Neighbors Mission Camp***.

***I have completed this application with full honesty and I am liable to provide any information to the Camp Director in writing if there should be any changes to the camper’s application by the time camp begins. I have read and agree to abide by Loving Neighbors Mission Camp Covenant as stated on the next page. I have read and understand the Release of Liability. I give my permission for my child to participate in Loving Neighbors Mission Camp, a housing rehabilitation project in Norfolk, VA. In the judgment of any representative of the Loving Neighbors Mission Camp, if the above-named camper should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said camper by any physician, hospital, or Loving Neighbors Mission Camp representative.***

## Participant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_

**Parent or Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_**

**If Paying Online Made By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount Paid:$\_\_\_\_\_\_\_\_\_\_\_\_**

**I am requesting a scholarship: Full \_\_\_\_ Partial: $\_\_\_\_\_\_**

Received by Registrar\_\_\_\_\_\_\_\_\_\_\_\_ Confirmation Sent \_\_\_\_\_\_\_\_\_\_\_

Paid On\_\_\_\_\_\_\_\_\_\_\_\_\_ Scholarship provided by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEDICAL INFORMATION**

**FOR CAMPER NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Is there evidence or history of Heart Problems or High Blood Pressure chronic infection of nose, throat, ears, sinus, and lungs? If so, what?

1. Have you had an appendectomy?
2. Has there been recent exposure to a contagious disease? If so, what?
3. Indicate any recent illness and/or surgery
4. Are you subject to:

**\_\_\_\_ high blood pressure \_\_\_\_fainting \_\_\_\_convulsions \_\_\_\_sleep walking**

**\_\_\_\_asthma \_\_\_\_hay fever \_\_\_\_overheating**

1. List inoculations that are still active Tetanus Covid (will not disqualify) Others

**Date of Last Tetanus**

1. List all allergies, such as: \_\_\_\_Penicillin \_\_\_\_\_Sulfa \_\_\_\_\_Insect stings \_\_\_\_\_Drugs Others (list)

Food Allergies (list) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 8. Are you on routine medication? No Yes If yes, name drug, dosage, and instructions:

1. List any diet restrictions
2. Are there any restrictions or special needs to be observed during work camp? (If so, explain)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Family Physician:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Person to notify in case of emergency:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Work:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I give my permission for my youth to participate in the Loving Neighbors Mission Camp, a housing rehabilitation project in Norfolk, Virginia. In the judgment of any representative of the Loving Neighbors Mission Camp, if the abovenamed camper should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said camper by any physician, hospital, or Loving Neighbors Mission Camp representative**.

HELPFUL COMMENTS CONCERNING CAMPER:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Insurance Policy Number**  **Company**

**In the name of**

**Relationship to camper**

**Parent or Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_**

# Loving Neighbors Mission Camp June 25-30, 2023

PLEASE NOTE: Camper Fees this year are $80.00 per camper.

ALL Applications may be **completed online at LNMCVA.ORG**

Or Mail to:

The Garden UMC c/o Loving Neighbors Mission Camp

2709 Greendale Ave. Suite 109 Norfolk, VA 23518

Or emailed to lovingneighborsmissioncamp@gmail.com

Payments may be made through LNMCVA.org; click on give and select Application FEE.

There is a limited amount of Camper spots available – So Get your Applications in

ASAP! Once camp is filled – a waiting list will be made. Campers will be notified by text that they are in camp or have been put on a waiting list.

**Sunday, June 25, 2023**

Campers may arrive to check in and set up their bedding area at **3:00 PM**

**Friday, June 30, 2023**

Camp Closing Ceremony will begin at **6:00 PM**

# Loving Neighbors Mission Camp “YOUTH” Tool & Gear List

Please put your name on ***EVERYTHING*** you bring to camp. You may want to use fluorescent tape or paint so you can easily identify your tools. Bring a bucket or toolbox to carry your tools to and from the work site. No need to buy new tools for camp. Accumulate what you can from the list below.

***Tool List:***

\_\_\_Hammer

\_\_\_Nail apron

\_\_\_paint brushes – (2) 4” for walls & (2) 2” for trim

\_\_\_paint roller frame

\_\_\_paint cups or empty coffee cans with lids for paint

\_\_\_tape measure

\_\_\_safety glasses

\_\_\_dust masks

\_\_\_paint scraper/putty knife

\_\_\_work gloves

\_\_\_knee pads

\_\_\_caulk gun

\_\_\_utility shears

\_\_\_pliers

\_\_\_flat &Phillips screwdrivers

\_\_\_2 pencils

***ALSO BRING:***

***\_\_\_*** cap or hat

\_\_\_sunglasses

\_\_\_sunscreen

\_\_\_work clothes for 5 days (old cotton shirts or T-shirts, durable, closed toe shoes, old shorts or pants) ***Sandals or flip-flops will not be allowed on the work site.***

\_\_\_at least one throw away outfit for painting

\_\_\_cot or air mattress with sleeping gear & pillow – **TWIN SIZE ONLY,**

\_\_\_towels & wash cloths for 5 days

\_\_\_casual clothing for evening – must represent the church!

\_\_\_swim suit, cover-up, beach towel – **Swim Suit MUST be Approved by Your Church.**

\_\_\_plastic bag or laundry bag for dirty clothes

\_\_\_personal hygiene products

\_\_\_IPOD, MP3 for night time ***ONLY!*** ***Will not be allowed on work sites, at evening activities or @ worship.***

\_\_\_carrier or bag for shower supplies

**No swim suits on work sites. Shirts are to be worn at all times. No baggy clothing that could get hung on equipment, tools, or work area. No mid-driff or low-cut blouses or low- rise pants or shorts.**

***ALL CLOTHING SHOULD REPRESENT THE CHURCH!***

***MOST OF ALL – A COOPERATIVE, SELFLESS, HARD WORKING ATTITUDE!!!***

**COVENANT OF CONDUCT FOR LOVING NEIGHBORS MISSION CAMP**

As Christian people and representatives of participating churches, we commit ourselves to uphold certain moral standards of behavior. These include:

1. Anything considered illegal for minors under civil and criminal law in Virginia is illegal to bring to Loving Neighbors Mission Camp. This would include tobacco use, vaping, alcohol consumption, and possession of firearms, weapons, or fireworks.
2. Visitation between males and females in sleeping areas is prohibited.
3. All participants are expected to be in designated places at all times, and to have a cooperative attitude.
4. All participants are expected to respect the host church, the property of other campers, the homes, and belongings where work is being done, as well as the designated work camp neighborhood.
5. Any damage to the host church will be the sole responsibility of the person or persons who cause the damage, and the corresponding responsible adult(s).
6. Quiet time begins one half-hour following the close of the last organized activity and continues until 6:00 a.m. the following morning. All participants in Loving Neighbors Mission Camp are expected to be in their rooms during quiet time and to be respectful of others so that all may get plenty of rest.
7. No outside visitors allowed on the work site or at the host church except parents of campers.
8. Attire should be representative of the “church” at all times. Please dress respectfully!!!
9. Any camper leaving camp for any reason; **MUST** notify Camp Director & must be picked up by a parent or legal guardian. Campers MAY NOT ride in a vehicle not driven by a LNMC Adult.
10. **WE ASK CAMPERS:** DO NOT BRING YOUR CAR TO CAMP. LNMC &/or The Garden UMC are not responsible for a vehicle left in the parking lot.
11. Personal Cell phones will **NOT** be allowed on work sites, during worship or during organized activities. If the cell phone is taken up it will not be returned until close of camp.
12. All Campers & Volunteers are expected to assist in Camp Headquarters Clean Up – Prior to leaving Friday.

**Loving Neighbors Mission Camp may use selected photographs taken during camp for promotional use. These photographs may include your child in camp related activities.**

**PLEASE UNDERSTAND THAT YOU ARE ASKED TO MAKE A COMMITMENT TO COME TO LOVING NEIGHBORS MISSION CAMP FOR THE ENTIRE WEEK FOR WHICH YOU REGISTER, AND THAT YOU ARE EXPECTED TO ATTEND CAMP ORIENTATION AND ALL ACTIVITIES, BOTH DURING THE DAY AND AT NIGHT.**

|  |
| --- |
| **Registration Note:**  **LIMITED NUMER OF CAMPER SPOTS**  **Completed applications with the $80 fee will be accepted starting January 1, 2023 with a cutoff date of April 18th (or until full)**  ***Each participating church MUST send 1 Adult with every 4-youth registered.***  **Eligible youth must be 12-18 years of age. If you are 11 years old now – You are eligible!!!**    **LOVING NEIGHBORS MISSION CAMP FEE SCHEDULE FOR 2023**    **Register January 1st – April 18th Total cost is $80.00 for Youth.**      ***LNMC will be accepting payment through LNMCVA.org online giving portal:***  ***Click on GIVE, Application Fee***  ***You will still need to complete your application online or mail to the LNMC mailing address***  ***you can also mail your payment along with your application.***  **Checks should be made payable to *Loving Neighbors Mission Camp***  *Fill out ALL 3 PAGES of this application form completely and return to:*  **The Garden UMC**  c/o Loving Neighbors Mission Camp  **2709 Greendale Ave. Suite 109**  **Norfolk, VA 23518**    To Contact the Registrar  Kat Boldin- 757-987-4160 |