

Camper's Photo



# Camper Application, 2025 Season

Child's name:	Today's date: (mm/dd/yy)
Age as of June 1, 2025: Date of Bi	rth: (mm/dd/yy) Gender of Child:
WHICH SESSIONS WOULD YOUR CHILD LIKE TO ATTEND?	A. CAMPER TUITION AND FEES
Tuition for all sessions is \$1750 per week. (Half of the total payment is due with this application	Register Prior to September 15, 2024: \$1200
to reserve a placement. The balance is due at the end of March, 2025)	Register Prior to November 15, 2024: \$1300
Campers may attend any combination of the fol-	Register Prior to January 15, 2025: \$1500
lowing sessions: (PLEASE CHECK YOUR RE-QUESTS)	Register After January 15, 2025: \$1750
I August 3 – August 9	TUITION AND FEES  Number of Weeks Your Child Will Attend:
_	The Fee Your Child Will Pay Per Week (See chart above) \$
	A. TOTAL TUITION (# weeks <u>x</u> weekly rate) \$
	B. TOTAL WEEKEND TRIP FEES (page 7) \$
•	C. TOTAL FOR PROGRAM FEES (page 9) \$
	D. TOTAL FOR STORE:(page 10) \$
Campers arriving a day early or departing a day late will be charged \$150 per day. Please alert the office staff to early arrivals or late departures!	E. TOTAL FOR TRANS. FEES: (page 12) \$
The Vineyard wants to continue to make itself	F .SUB-TOTAL (A+B+C+D+E) \$
available to campers whose families cannot afford to send their child(ren) to the camp. We rely on	H. GRAND TOTAL \$
the generosity of friends of the camp to provide	<u>DUE NOW:</u> 50% OF TOTAL \$
scholarship funds for these campers. If we identify a camper who would otherwise not be able to	(50% of Line H)
attend camp, may we contact you about making a contribution to assist with their cost?	DUE MARCH 30: REMAINING 50%. \$ (50% of Line H)
Yes No	PAYMENT OPTIONS
	(Please see payment methods on page 13)

Name of camp last attended: Number of years:					
Father's name (DR./MR.):					
Occupation of Father:					
Address of father:			City:		State:
Zip:	Country:			Phone:	
Work:	Cell:		E-Mail:		
Mother's name (Dr./M	Irs./Ms.):				
Occupation of mother	•				
Address of mother:			City		State:
Address of momer:			City:		State:
Zip: Country: Phone:					
Work:	Work: Cell:		E-Mail:		
			<u> </u>		
Will the parents be home while this child is at camp?			If no, how may we contact them?		
If parents are divorced, to whom should billing and correspondence be sent?					
Who has custody of this child?  Is either parent prohibited from visiting?					
Names of brother:		Age:	*		Age:
Names of sisters:		Age:	*		Age:

	e any desires you have for			
take your child off the	security of every child ver camp property or check you will be prohibited from lear	our child out on closing d	ay. (Please note that if t	the names are not
Name	Relation:	*	Relation	n:
and that the child reque apart in age. Also, if th	essible to honor a cabin-mested must reciprocate by a ere is a child you do not we e camp cannot promise th	asking for your child. The rant your child to room wi	friend should be no ment, please make that cle	ore than one year
Please do not plac	ee my child in a cabin w	ith		
HOW DID YOU	J HEAR ABOUT US?	DO YOU HAVE FI	RIENDS INTERES	STED IN
Camp presenta Camp fair: Media: Internet: A friend (Who:		Name: Address: City, State, Zip, Coun Phone: Email: Name: Address: City, State, Zip, Coun		
		Phone: Email:  Name: Address: City, State, Zip, Coun Phone: Email:	try:	

**Insurance:** 

We do not provide medical coverage for accidents and illnesses. Parents must provide their own medical insurance for campers. We are happy to recommend short-term medical coverage for international campers. Please call our office for more information. Please provide a copy of your medical insurance card with your medical forms.

#### Fees:

Camper tuition covers all activities including meals, lodging, laundry services, regular out-of-camp trips, instruction in most programs and camp supplies. Optional expenses include camp store purchases, weekend trips and program fees.

#### Cancellations/Refunds:

Cancellations must be received by fax, E-Mail, or U.S. mail by May 1, 2025. The first \$300 of the deposit is non-refundable. The remaining deposit will be refunded after the summer season. There is no refund after May 1 for any reason other than major illness or injury. In that case, the parents and the camp will split the total cost of the tuition refund. There is no refund for homesickness. If tuition is not received by March 31, 2025 (and a payment plan has not been arranged with the camp office), the camper's name may be removed from the registration and no deposit refund will be made.

### **CERTIFIED BY:**

#### **Accreditation:**

The Vineyard is committed to excellence in every manner. This comes as a result of professional leadership and conducting programs in a safe environment. At our camp, we meet or exceed every county, state, and federal guideline for camping. We are certified by the CCI/USA and NCA. Our facilities are annually inspected by the state and local health officials (Sanitation Grade A).

The Vineyard is a non-profit 501 (c)(3) corporation. We are an evangelical, inter-denominational ministry and have no associations with, or ties to any other ministries including those bearing the name "Vineyard" (e.g. "Vineyard Music", "Vineyard Churches"). Our purpose is to share God's love with children and youth who join us. We hope that the activities and scheduled devotions will challenge all who attend to become followers and disciples of Jesus Christ. Campers of all faiths, nationalities, races, and denominations are encouraged to join us as we share in Christian worship and life.







### Who May Apply?

We accept any well-behaved girl or boy, five to sixteen years old, from any nation. Those applying should recognize that we are a camp that includes Catholic and Protestant campers from all over the world, and that the Christian faith is shared through a balanced schedule of skill instruction, recreation, and brief devotions. We do not discriminate in our camper admission process due to race, sex, national origin, color, or religion. The camp does, however, reserve the right to refuse admittance to any individual whom the camp management deems an undesirable companion for other campers. (Please refer to the camper application for more information.)

#### Other Forms/Post Registration Procedures

After the camp office receives your application, you will be e-mailed the forms listed on this sheet. Check-In day registration can be significantly hastened if these forms have been completely filled out and mailed back to the camp office before May 30., 2025

- 1. Medical Form. These must be completed by the family physician and must include a medical history of the child. During Check-In day registration, parents must make the camp nurse aware of any medical conditions that have arisen since the medical form was mailed to us. This form must be witnessed and signed by the parent. Please send a copy of your medical insurance card with your application.
- 2. Transportation Form. This should indicate the means of travel to and from the camp. Please give explicit information regarding time of arrival and dates. If your child is coming by plane, bus, or train, please call the camp office two days before arrival to confirm the airline, bus, or train information. Mail in this form or email as soon as you confirm your travel plans. Please keep us posted of any changes in arrivals & departures. (If by car, please still e-mail in your form!)
- 3. Activity Form. Please select the "Major" your child would like to take while at camp, and also include your second and third choices. This form lists the eleven majors along with special considerations and limitations. You will also see a list of the "electives". Please make us aware of any elective you would not want your child to take, as well as electives you would have us encourage your child to take. Majors are given on a first come, first serve basis. Apply early!
- <u>4. Store Form.</u> Use this form to pre-order clothing, laundry bags, and other products from the camp store. Sizes can be adjusted on the first day of the camp.
- <u>5. Confirmation Letter.</u> This is our acknowledgement that we have received your application and deposit. This letter also indicates the balance still owed to the camp. <u>Please note that this is the last correspondence you will receive from us unless there is confusion in your child's registration or we were unable to honor the first choice of majors.</u>

# Tipping

We consider it inappropriate and unprofessional for a camp staff to accept a "tip" or gratuitous gift for serving a child. Please help us circumvent an awkward scenario by not offering any form of compensation to our staff. Should you feel strongly inclined to give something, please consider a gift to our scholarship or chapel fund or our Capital Campaign.

#### Visits and Phone Calls

We understand that a camper's time away from home can be more stressful on the parent than the child, and we therefore permit parents to visit or call the camp at any time. If you do visit, please call the camp office at least two days in advance, and if possible, visit on Saturdays or Sunday. You may speak to the counselor of your camper if needed or the boys or girls camp director. Please be aware that whereas your visit or phone call may help you, it may make your child's experience at the camp more difficult and the transition more timely. We also permit campers to call home, but only after receiving permission from the camp director, and only after one of the directors has talked to the parent. Years of camping experience has taught us that encouraging letters and post cards are far more beneficial to the camper than calls and visits. We know of no other camp anywhere that offers such a liberal policy towards parental contact with their child, but we recognize the parents' rights and responsibilities to their child. Your visits and calls are not worrisome to us (provided they do not interfere with the rights of other campers); they represent an opportunity for us to minister to you and your family.

## **Extending Sessions**

Campers frequently request to stay an extra week or more at the camp. If bed space is available, we are happy to accommodate them. If staying an extra week is not an option, kindly indicate this on the "confirmation" letter you will receive or send an email to our Registrar.

# **POLICIES & PROCEDURES**

#### Behavior

All children are expected to behave and respond to those in authority in a manner that is consistent with the goals and ideals of The Vineyard. We do not tolerate negative attitudes and disruptive behavior-especially when such behavior takes away from the positive experience of other campers. We accept most all children at our camp, but children unaccustomed to discipline and limits would not find our camp to their liking. Tobacco (in any form) alcohol, illegal drugs, profanity, and questionable remarks and gestures are simply not tolerated. We will send home campers who prove themselves to be undesirable companions to other campers (no refund will be made), and will refuse admittance to those campers whom we deem a risk to the safety, spirit, or smooth operation of the camp. Non-respect of our policies/rules by a camper may result in disciplinary action (e.g. muck stalls at the Barn, pick up golf balls, not taking part of an activity, help during the meals...).

### Clothing/Personal Property

The camp cannot assume any responsibility for any lost, damaged, or stolen property. Campers should not bring expensive clothing, jewelry, electronic games, or other non-essential items to the camp. The camp prohibits campers from bringing TV's, iPods, stereos, radios, guns, and sheath knives.

#### **Dress Code**

Parents are urged to assist their child in packing for camp-particularly teenagers! Dress here is very casual - old jeans, T-shirts, and old tennis shoes are fine. Girls should pack one piece bathing suits of modest taste. Shirts with vulgar graphics or profanity should not be packed. In addition, campers are not permitted to wear any "body piercing" jewelry or offensive paraphernalia. Females are permitted to wear modest pierced earrings but, once again, this is not the place for nice jewelry. Boys (and girls) are reminded to refrain from bringing shorts or pants that will not fit snugly around their waist or shorts that are too short

### **Laundry Service**

The camp provides laundry service free of charge one time per week for all campers staying for seven or more days. Campers should bring a laundry bag and should only pack clothes that are colorfast. We highly recommend that parents write their child's name in every piece of laundry they want returned to them. Campers should pack their own linen (two twin size sheets), a pillow, towels, light blanket, and lightweight sleeping bag.

## Camp Store ("Wine Cellar")

Parents are encouraged to leave at least \$25 per week in their child's store account. We offer everything from drinks and snacks, to stationary, stamps, clothing, and souvenirs. All campers are required to purchase a pair of XiRho pants (\$20) on opening day. At the conclusion of your child's stay at camp, the balance from their account will be refunded.

#### **Spending Money**

A surcharge of 1% or \$3 minimum must be added to any credit card charge we make on your credit card for spending money for your child. Wire transfer fees also apply.



RETURN TO:
The Vineyard
1945 Vineyard Rd.
Westfield, NC 27053
USA
Tel: 1-336-351-2070
Fax: 1-336-351-2902
letters@vineyardcamp.com
www.vineyardcamp.com



# Weekend Trips Form, 2025 Season

DESTINATION	PRICE	SESSION OF ATTENDANCE
WASHINGTON D.C	\$1000 US	
CAROWINDS, SC	\$200 US	
MALL, NC	\$75 US	

SESSION	DESTINATION
End of B	CAROWINDS S.C., MALL
End of C	WASHINGTON D.C.
End of D	CAROWINDS S.C., MALL
End of E	WASHINGTON D.C.
End of F	CAROWINDS S.C., MALL
End of G	WASHINGTON D.C.
End of H	CAROWINDS S.C., MALL
End of I	WASHINGTON D.C.
End of J	CAROWINDS S.C., MALL

# Please check all that apply:

\$1000 for Washington, DC \$200 for Carowinds \$100 for Concorde Mill Mall

B. TOTAL FEES FOR WEEKEND TRIPS: \$\_\_\_\_\_\_ (Please place this sum on the payment section of this form.)



# Activity Form, 2025 Season

RETURN TO:
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1945 Vineyard Rd.
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## **MAJORS**

Majors are issued on a first come, first serve basis. It is prudent to send this form back to the office at once – some majors fill quickly. In fairness to all, no phone reservations are taken. Majors last for two hours each day. Please indicate your 1st, 2nd, and 3rd choices. You will be notified by the camp if your child does not receive his/her first choice, second or third choice.

#### **Body Conditioning**

Offered to boys ten and older. Free weights, machines, kettle bell training resistance training, abdominal exercises and nutrition are all covered.

#### **Body Toning**

Offered to girls of any age: Instruction is given (basic to advanced) and may include gymnastics, pilates, Nautilus machines and free weights for toning and resistance training.

#### **Crafts**

Offered to boys and girls of all ages. Pottery, basketry, wood working, painting, etc. are a part of this major. There is no extra fee for craft supplies.

#### **Equitation**

Western and English style riding for boys and girls of all ages. All campers will learn basic skills, grooming, basic horsemanship, trail riding, and jumping. (Hard soled, heeled shoes and long pants are required.) There is a \$250 surcharge for horseback riding.

#### Fishing

Offered to boys or girls who have passed the basic swim test. Instruction in making lures, fly casting, cleaning and preparing fish. Includes daily trips to different fishing sites and different techniques in fishing.

#### Shooting

Offered to boys and girls 10 years or older. Safety, maintenance and marksmanship are emphasized. Pistols, rifles and shotguns are used.

## **Swimming**

Offered to boys and girls of all ages. Instruction will be given for the four basic strokes, starts, flip turns, along with drills and timed laps. The swimming major will be taught by lifeguard certified swimming instructors, with a minimum of two staff at the pool during instruction.

#### **Tennis**

Offered to boys and girls of all ages. Basic strokes, drills, rules, tennis etiquette and tournament toughness are taught on our all-weather courts. (Personal tennis racquet is required; rentals available for \$10/week).

#### Water Skiing

Offered to boys and girls who are proficient in swimming. Instruction is offered in slalom, tricks, wake and knee boards, as well as boat safety. (There is a \$125 per week surcharge for this major).

#### Wilderness Adventure

Offered to boys and girls weighing at least 60 pounds AND possessing basic swimming skills. May include out of camp canoeing, water skiing, hiking, backpacking, swimming. (There is a \$50 per week surcharge for this major).

#### **ELECTIVES/CLINICS**

In addition to majors, all campers select two electives each day. The activities are not as intense as the major but provide variety and new learning experiences for the campers. Listed below are electives that are offered during camp. Please note that campers under the age of 10 are not eligible for Shooting, Riflery, Paint Ball and Skeet.

Please place an X by the electives in which you want your child to participate.

Follow this web link (www.vineyardca	mp.com) for any descriptions.	
Adventure TowerArcheryBaseballBasketballBilliards	Crafts Fencing Football Horseback Riding Mountain Biking	RifleryRock ClimbingRugbySkeet ShootingSoccer
Conversational English	Paint Ball	Swimming
Conversational French Conversational Spanish	Rappelling/ Climbing	Table Tennis Volleyball
time of registration. Placement cann	ot be confirmed until payment has been a ickly as there is limited space available. T	venture as a Major must include payment at the received. Majors are determined on a first come, he program fee for each of these Majors will in-
Please check all that ap	oply:	
\$125 for Water Skiing (or	ne week)	
\$250 for Equitation (one	week)	

C. TOTAL FEES FOR PROGRAM: \$\_\_\_\_\_\_ (Please place this sum on the payment section of this form)

\$50 for Wilderness Adventure (one week)





# Pre-Order Clothing Form, 2025 Season

Please make your selections and return to our office with full payment at least one month prior to attending. Your order will be waiting for you upon check-in. **ALL CAMPERS** are required to purchase **XI RHO PANTS** (unless they are a returning camper bringing last year's pants with them). If you are not sure of the size, clothing can be exchanged on check-in day.

We recommend that each child purchase at least \$20.00 per week to be used in the store for snacks, drinks, and toiletries.

Pillow/Sleeping Bag/ Sheets	Standard	\$60	
Xi Rho Pants	YL AS AM AL AXL	\$20	
Laundry Bag		\$14	
2025 Camper T-shirt	YM YL AS AM AL AXL	\$25	
Vineyard Sweatshirt	YL AS AM AL	\$40	
Rain Poncho	One size fits all	\$3.50	
Vineyard Caps - IAPs must have!	Varied Colors	\$15	
Vineyard Camp Blanket	Blue, Embroidered	\$25	
Spending Cash for Trips	Suggested \$25/week		
	TOTAL	\$	

D. '.	TOTAL FEES FOR CAMP STORE: \$
(	(Please place this sum on the payment section of this form)



# **RETURN TO:** The Vineyard 1945 Vineyard Rd. Westfield, NC 27053 USA Tel: 1-336-351-2070 Fax: 1-336-351-2902 letters@vineyardcamp.com

www.vineyardcamp.com



# Transportation Form, 2025

There is a roundtrip \$200 airport/train/bus transport fee for ALL Campers, IAP's, and LITs arriving/de-

parting from Greensboro, NC. There is a \$400 rou and LIT's arriving/departing from Charlotte.	andtrip airport transport fee for ALL Campers, IAP's,	
TRAVEL BY AIR		
Arrival		
Name of Airline:		
Flight Number:	Arriving from:	
Day of Arrival:	Date of Arrival:	
Time of Arrival: Name of Airport:		
Departure		
Name of Airline:		
Flight Number:	Departing from:	
Day of Departure:	Date of Departure:	
Time of Departure: Name of Airport:		
TRAVEL BY BUS		
Arrival		
Name of Bus-line:		
Bus Number:	Arriving from:	
Day of Arrival:	Date of Arrival:	

Name of Depot:

Time of Arrival:

# Departure Name of Bus-line: Bus Number: Departing from: Day of Departure: Date of Departure: Time of Departure: Name of Depot: TRAVEL BY CAR Arrival Name of Driver: Date of Arrival: Day of Arrival: Time of Arrival: Departure Name of Driver: Day of Arrival: Date of Arrival: Time of Arrival:

\_\$200 Greensboro Airport, round trip

\_\_\$400 RDU or CLT Airport, round trip

E. TOTAL TRANSPORATN FEES: \$\_\_\_\_\_ (Please place this sum on the payment section of this form)

Means of Payment	
I have paid \$	in cash to the camp representative.
I am enclosing a check in	n the amount of \$
Please charge \$	_ to my credit card.
Name as it appears on car	
Visa Discover Master Card American Express	
Card Number:	
Expiration Date:	_ (mm/yy)
Signature of Card Holder:	
Make checks payable to: (please include your deposit The Vineyard Camp and Ret	
1945 Vineyard Road Westfield, NC 27053 USA	
E-Mail: <u>letters@vineyardcam</u> Tel: 1-336-351-2070 Fax: 1-336-351-2902	np.com

Web: www.vineyardcamp.com



# **Agreement Between THE VINEYARD, INC.** and:

The Vineyard
1945 Vineyard Rd.
Westfield, NC 27053
USA
Tel: 1-336-351-2070
Fax: 1-336-351-2902
letters@vineyardcamp.com
www.vineyardcamp.com

We, the before-named person, being above age eighteen, or the legal guardian of the above named person who is under 18, in consideration of the services of THE VINEYARD, INC. hereby acknowledge and agree as follows:

# ACKNOWLEDGEMENT AND ACCEPTANCE OF RISK

I understand and acknowledge that camp's activities, including, but not limited to the ROPES COURSE AND PAINT-BALL ACTIVITIES, the activities I am about to engage in voluntarily, bears certain risks, which could result in injury, death, or damage to my property. These activities will be similar to a very active day of recreational activities. These activities are designed to be safe and staff will explain each activity and safety systems will be used when appropriate. Some activities will take place at heights up to 50' and some include the use of firearms. My participation is voluntary. I will not be required to participate against my wishes. I understand, acknowledge and hereby accept and assume all responsibility and risk arising from my voluntary participation in this activity, except for gross negligent acts or omissions of THE VINEYARD, INC., its agents, employees, and contractors

My signature below indicates that I have	e read this entire document, understand it comple  Signature of participant	Date (mm/dd/yy)
My signature below indicates that I have	e read this entire document, understand it comple	etely and agree to be bound by its terms.
I have read this section, and initial to sh	now that I understand and agree:	(Initial)
	ement between Myself and THE VINEYARD, I hanged in any way by the representations or sta	
I have read this section, and initial to sh	now that I understand and agree:	(Initial)
any other condition that may occur of a direct or indirect result of participation.	NC. and its staff from any and all liability for a during participation in any activities or progration in any activities or programs of THE NEYARD, INC. or its staff in connection with a	rams of THE VINEYARD, INC. or as VINEYARD, INC. and waive my right
I have read this section, and initial to sh	now that I understand and agree:	(Initial)
T1 141 2 1112 1 1		







# Health Form - Part A (Parent's Form), 2025 Season

Please have the parent or guardian fill out this portion of the health form.

Please check sessions(s) of attendance: A B	C $D$ $E$ $F$ $G$ $H$ $I$	Ј К	
Child's name in full:		Birth Date:	
Social Security Number:	Age:		Gender:
1) Parent or Guardian (or Spouse):		Phone:	
Home Address:			
Street & Number, City, State, Zip Code, Country	A STATE OF THE PARTY OF THE PAR		
Business Address:	And the same		
Street & Number, City, State, Zip Code, Country, P	hone		
2) Second Parent or Guardian or Emergency		Phone:	
Home Address:	- 19	PF	
Street & Number, City, State, Zip Code, Country  Business Address:			
Street & Number, City, State, Zip Code, Country, P.  3) In not available in an emergency, notify:	hone	Phone:	
Home Address:	W.		
Street & Number, City, State, Zip Code, Country <b>Business Address:</b>			
Street & Number, City, State, Zip Code, Country, P	hone		
Health History: (Check giving approximate	Diseases		Allergies
Frequent Ear Infections	Chicken Pox		Hay Fever
Heart Defect/Disease	Measles		Ivy Poisoning,
Convulsions	German Measles		Insect Stings

Diabetes	Mumps	Penicillin		
Bleeding/Clotting Disor-		Other Drugs		
Hypertension		Asthma		
Mononucleosis				
Other				
Operations or serious injuries (dates):				
Dietary modifications:				
Current medication (send with instructions):				
Other diseases or details of above:	THE REAL PROPERTY.			
	Sept.	Diverse		
Name of dentist/orthodontist:		Phone:		
Name of family physician:		Phone:		
Date of last physical examination:	Do you carry	family medical/hospital insurance?		
If so, indicate: Carrier, policy or group #, add	ress, telephone #	and copy of medical insurance card		
Suggestions or health related information for o	camp personnel:	#		
(For Female): Has this person menstruated?	If not, has sh	ne been told about it?		
If so, is her menstrual history normal?	Special consideration:			
	1			
or to order X-rays, routine tests and treatment for gency, I hereby give permission to the physician for, and to order injection and/or anesthesia and	or me/or my child selected by the c l/or surgery for m	o the medical personnel selected by the camp directed and in the event I cannot be reached in an emercamp director to hospitalize, secure proper treatment or my child as named above. The infirmary staff scribed medications. This form may be photocopie		
Signature of Parent/Guardian or Adult Cam	per/Staffer:			
Signature of Witness or Spouse:				



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# Health Form - Part B (Doctor's Form), 2025 Season

Please have your family physician fill out this form.

An examination is required annually for camp registration.

Immunizations MUST be current.

Camper/Staff name:	Bi	rth Date:
MMUNIZATION HISTORY ease record the date (MONTH and Y	EAR) of basic immunizations and	most recent booster doses:
Vaccines	Month / Year of Basic Immunization	on Month / Year of Last Booster
Diphtheria	1)	1)
Pertussis) DPT*	2)	2)
Tetanus	3)	3)
Tetamis TD*	7	
Tetanus	No.	
Oral Polio (Sabin) * TOPV		
Injectable Polio (Salk)	7007	
Measles (hard measles, red measles, Rubeo-		
Mumps		
Rubella (German measles, 3-day measles)		
Other		
Tuberculin test given	(most recent)	

Current treatment (include o	current med	dications):			
Explanation of any reported	l loss of co	nsciousness, co	nvulsion, or concussion:		
Does applicant have epilepsy?	Yes	No	Does applicant have diabetes?	Yes	No
Recommendations and restr	rictions whi	ile at camp:	·		
Any treatment to be continu	ed at camp	<b>:</b>			
Any treatment to be continu			c dosages/Medication must be brough	nt in origin	al containers)
Any treatment to be continu			dosages/Medication must be brough	nt in origin	al containers)
Any treatment to be continu  1. Any medication to be adm	ninistered a	t camp (Specific		nt in origin	al containers)
Any treatment to be continu  1. Any medication to be adm	ninistered a	t camp (Specific		nt in origin	al containers)
Any treatment to be continu  1. Any medication to be adm  2. Any medically prescribed	ministered a	or dietary restri		nt in origin	al containers)
Any treatment to be continu  1. Any medication to be adm  2. Any medically prescribed	ministered a	or dietary restri		nt in origin	al containers)
Any treatment to be continu  1. Any medication to be adm  2. Any medically prescribed	ministered a	or dietary restri		nt in origin	al containers)
Any treatment to be continu	ministered a	or dietary restri		nt in origin	al containers)
Any treatment to be continu  1. Any medication to be adm  2. Any medically prescribed	ministered a	or dietary restri		nt in origin	al containers)