

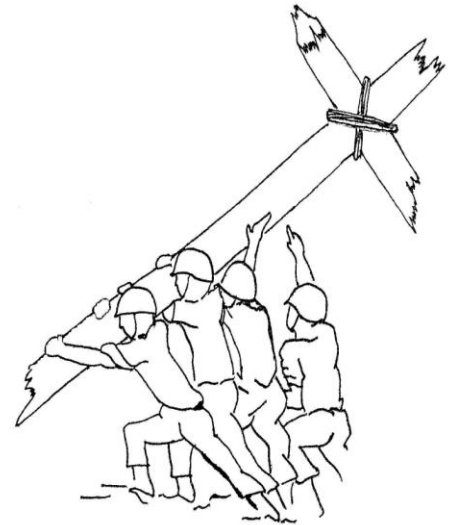
Dear Parents of Cross Training Campers:

Thank you for your prayers and support as we plan and staff CTC 2011. We look forward to being a part of your child's summer.

Please print and mail the registration form

1. Cost – We are **not** raising the price of camp; it will be \$125 as it has been for the past few years. We are trusting that this will be sufficient to meet costs. One way our costs are managed is by our volunteer staff. We thank God for their quality, dedicated service.
2. Registration – **Campers are considered registered only when the registrar receives both a completed registration form and the deposit.** The registrar is not located at the church office. She is a dedicated volunteer giving of her time to coordinate the registration procedure. **Please** mail your registrations to the PO Box listed on the brochure. When your registration is processed, you will receive an email confirmation.
3. T-shirts – **A camp T shirt is not included in the camp cost this year.** If you wish to purchase a camp T-shirt for your camper, please include \$10 per shirt with your registration fees and mail in with the registration by June 23.
4. There will be a closing ceremony on Saturday morning, beginning at 9:00 am. Parents and family are welcome to attend. We will attempt a simplified slide show that includes pictures of campers and activities throughout the week.
5. Dietary/Medical needs: In past years we have attempted to accommodate dietary needs such as food allergies. While we still wish to make that effort, we may be unable to accommodate serious allergies or modifications – our kitchen and food prep staff has limitations. Please email the registrar to determine whether we can meet those needs.

We thank you for support of this ministry and your understanding as we try to improve our program and its impact on your children. If you have any questions, you can email crosstrainingcamp@gmail.com. This address is being checked on a daily basis. Thank you!



FALL IN!

Cross Training Camp has been in operation since 1988 for campers 9 to 15 years old. Our purpose is to strengthen campers in the promises and love of God, while encouraging stronger relationships with God and people in our lives.

Carefully chosen counselors and junior counselors guide campers throughout the week. Activities emphasize teamwork and cooperation and include sports, swimming, canoeing, an obstacle course, and various team-building exercises.

Each morning campers participate in worship and Bible classes, followed by group discussion. Evenings bring campfires, testimonies, and devotions.

God uses this environment to grow campers and staff, both in relation to each other and to Him. All are challenged and equipped as better soldiers for Christ.

FACTS

Who: 9-15 year olds

Dates: Girls' week July 10 – 16
Boys' week July 17 – 23

Place: Grace Fellowship Church
365 Straub Road East
Mansfield, Ohio 44903

Cost: \$125 - \$65 non-refundable deposit due with registration form. Remaining balance of \$60 is due the first day of camp.

If purchasing a camp T-shirt, include shirt fees with registration deposit by June 23. No orders for T-shirts will be accepted after this date.

Times to remember:

Arrival: Sunday July 10 or 17
(6:00pm – 7:00pm registration – Please eat before you come as no meal is provided that evening.)

Final Program: Saturday July 16 or 23
(9:00am - 10:00am)

Please make checks payable to:
Cross Training Camp

***Mail checks and registrations to: ***
Cross Training Camp Office
P O Box 3921
Mansfield, OH 44907

***** Please note that mailing or dropping off registrations at the church address will add 3 or 4 days to the date when the registrar actually receives them. *****

Registrations will be taken until camp is full. However, we cannot order a camp T-shirt for you if you register after June 23.

All questions may be directed to:
crosstrainingcamp@gmail.com
This email is checked daily.

BE SURE TO BRING:

- ✓ Six to eight changes of clothing
- ✓ Swimsuit, beach towel, sandals
- ✓ Old tennis shoes (2 pair)
- ✓ Toiletries (soap, shampoo, comb, toothbrush, toothpaste, deodorant, etc.)
- ✓ Towel and washcloth for showers
- ✓ Bible, pen, and notebook
- ✓ Sleeping Bag or blankets and pillow
 - ✓ Bug spray
 - ✓ Flashlight
- ✓ Any medications (Be sure to hand in at registration table)

OPTIONAL:

- ✓ Camera
- ✓ Pre-stamped envelopes or postcards

DO NOT BRING:

(These will be confiscated and returned at the week's end)

- Cell phones
- Money
- Makeup
- Magazines
- Snacks, gum, beverages
- Electrical appliances (alarm clocks, hair dryers, mp3 players)

REGISTRATION FORM

Camper Name & Address

Parent's Email Address

Birth date (include year)

Gender M or F

Name of church camper attends (optional)

Has the camper ever been to camp before?
Y or N

If yes, name of camp

T-shirt Size (Adult sizes) S M L XL
Please include \$10 per shirt to the
Registration fees by June 23.

In emergencies requiring immediate attention, your child will be taken to the nearest hospital emergency room. Your signature below authorizes a representative of CTC to have your child transported to that hospital.

Insurance Company _____ Group # _____
Policy Holder's
Name _____ Policy# _____

Physician's Name _____ Phone # _____

Mail this form with deposit check to:
Cross Training Camp Office
PO Box 3921
Mansfield, OH 44907

EMERGENCY CONTACT INFORMATION, MEDICAL AUTHORIZATION AND RELEASE AGREEMENT

Please understand that emergency treatment will not be given to this child without parental consent. This release gives permission for an authorized representative from CTC to administer first aid. In the event of a serious illness or injury, if parents or alternative emergency contacts cannot be reached, this form gives permission for the child to be treated at the nearest medical facility.

In case of medical emergency, I understand that every effort will be made to contact me or my emergency contacts. If I or the emergency contacts (listed on this form) cannot be reached, I give permission to CROSS TRAINING CAMP DIRECTOR, authorized representatives, or designated staff to secure the medical treatment deemed necessary for my child; including hospitalization, injection, anesthesia, or surgery. By my signature I hereby waive, release, and hold harmless the volunteers, staff, helpers, participants, and/or all others associated, affiliated, or aligned Cross Training Camp.

I further agree to indemnify, protect and hold harmless Grace Fellowship Church, Cross Training Camp, its officers, board members, and all other persons or organizations volunteering services for my child participating in Cross Training Camp from any claim or liability whatsoever, including but not limited to personal injury, property damage, court costs, attorney's fees and interest, however caused even if the negligence of camp or church personnel, as a result of my child's participation.

I further agree that Grace Fellowship Church, Cross Training Camp, its officers, board members, and volunteers reserve the right to terminate the participation of my child in the program for failure to behave and act in accordance with the camps regulations on conduct or in any way be detrimental to or incompatible with the interest, harmony, comfort or welfare of the program. If participation is terminated, no fees will be refunded.

Parent/Guardian Signature Date

Emergency name(s) and number(s)

