

2024 Camper Confirmation

Parent/Guardian & Camper Review Together

Camper Liability Waiver, Health Release, Emergency & Health Contact forms need to be emailed to rodeobiblecampgc@gmail.com. Forms must be on file before the child can participate in any camp activities.

Camper Name: _____

Event: _____

This letter is written to confirm your registration for the Journey to the Cross (JTTC) Rodeo Bible Camp scheduled for June 13th to June 16th, 2024, in Garden City, KS.

- Check-in will be held from 1:00pm-4:00pm on Thursday, June 13th.
- Parents, grandparents, family, and visitors are welcome on the fairgrounds starting at 9:45 am to join us for our annual church service on Sunday, June 16th at 10:00am with a free will donation lunch to follow.
- The grand entry starts at 12:45pm and the rodeo begins at 1:00pm on Sunday, June 16th.
- Campers will be dismissed following a final stall check after the presentation of awards on Sunday, June 16th, at approximately 5:00 pm. **HORSE STALLS MUST BE CLEANED** and approved by the camper's designated instructor prior to departure.

In case of a family emergency, the camper can be reached by calling Tyrell Reynolds – camp director at (620) 376-8507. This number is for **EMERGENCIES ONLY!**

Directions to Rodeo Bible Camp – **Located at Finney County Fairgrounds**

From the South or East/From Main Street - Turn west on Maple Street - then go 1 block west, then ½ block south on 9th Street; enter backside of fairgrounds.

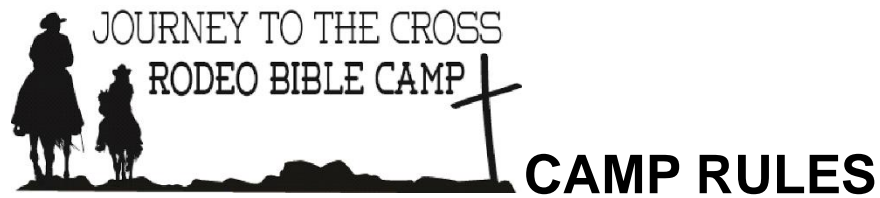
From the North or West - Turn south on Hwy 83; turn west onto Mary Street; turn south onto VFW Road, turn left onto Maple Street, and go 1 mile east on Maple Street; then turn south on 9th Street; go 50 yards; then turn right on the north side of arena.

What to bring to Camp:

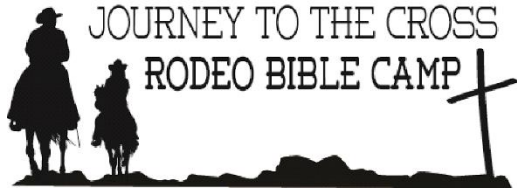
- Bedroll, pillow, and sleeping pad/cot or air mattress and air pump for camper to sleep on.
- Personal care items: towel, soap, toothbrush, toothpaste, comb, shampoo, deodorant etc....
- Shower shoes are not required but recommended! A cheap pair of flipflops works!
- **Clean clothes for Friday, Saturday, and Sunday: Jeans and western boots are required to be worn every day including Thursday. Short-sleeved shirts may be worn on Thursday, Friday, and Saturday but on Sunday campers must wear a long-sleeved**

collared shirt (button-up) and cowboy hat for the Camp Rodeo. Make sure to pack APPROPRIATE pajamas for walking from the showers to the sleeping quarters and for sleeping.

- BIBLE, flashlight, bug repellent, sunscreen
- Horse with all available tack (i.e., extra bits, blankets, etc....) except for the Horseless Horsemanship Class. Rough Stock events will need to bring event specific gear.
- Hay, hay net or tub, feed, large water tub or MULTIPLE water buckets, shovel and/or stall picker to clean stalls daily.
- **Stalls will be provided - \$40 of camper registration fees will be used for stall rental (JTTC will rent the stalls from Finney County Fairgrounds...JTTC will be reimbursed stall fees ONLY IF stall is as clean or cleaner than when camper arrived.) Instructor MUST sign off on the condition of stall PRIOR TO camper being excused to leave campgrounds when camp is over.**
- **Campers must bring a minimum of 2 bags of shavings per stall (excluding Horseless Horsemanship campers and rough stock campers).**
- Rodeo gear – Necessary per your selected event. Ropes for team roping, breakaway, tie down, rigs for bull riding, etc.
- No dogs permitted on the campgrounds – PERIOD per rules of Finney County Fairgrounds.
- Long-sleeved shirts, jeans, western boots, and cowboy hats **MUST** be worn for pictures and while competing in the arena on Sunday.
- Clearly mark ALL belongings with your name BEFORE YOU ARRIVE.
- NO ALCOHOL or TOBACCO – **PERIOD**
- *****PLEASE LEAVE CELL PHONES AT HOME*** Cell phones can also be turned into camp administration at the beginning of camp.**
- EVERY camper is required to attend ALL scheduled activities.



- Campers are permitted to leave the fairgrounds only with the permission of the Camp Director.
- Campers are expected to be prompt at all meals and meetings unless excused by Camp Director or Camper's Team Leader.
- Campers are required to attend all scheduled activities.
- Boys will not be permitted in the area of the girls sleeping quarters and girls will not be permitted in the area of the boys sleeping quarters.
- Every camper is responsible for his/her own personal belongings (please label everything prior to arrival).
- Campers are required to stay in their sleeping quarters from the time of "lights out" until morning, there are exceptions for special emergencies but only with the permission of an adult counselor.
- It is expected that everyone will dress in a manner that is pleasing to God and does not draw unnecessary attention to oneself. Questions in this area should be directed to the Team Leaders and/or Camp Director. No tank tops or low cut, tummy showing t-shirts or blouses; no shorts; no baggy-saggy blue jeans.
- Cell phones, iPods, iPads/tablets, and any other electronic devices are not permitted at camp. Outgoing emergency phone calls will be assisted by Camp Directors. Smartwatches are permitted if camper use is solely for keeping track of the time. If campers are distracted by anything involving their smartwatch, they will be asked to leave it in their bag or trailer for the remainder of camp.
- We encourage Christ-honoring relationships between boys and girls. No hand holding, etc....respectful manners always.
- Any case of illness, injury, or infection must be reported to an adult counselor, by the camper at once. Failure to do so may jeopardize any claim for insurance.
- No alcohol, tobacco, illegal drugs, or swearing; we must set a good example.
- Everyone is expected to stay at Camp until pictures are taken, awards are presented, and ALL baptisms are completed following the conclusion of the rodeo on the last day. Check with the Camp Director ahead of time for exceptions. You MUST check with your Event Director about signing off on your horse stall.
- **SAFETY IS A PRIORITY.** Roping of any part of any person is not allowed. Out of control roughhousing causes serious injury.
- Campers are required to sleep overnight at camp designated areas.



CAMPER LIABILITY WAIVER

PARTICIPANT NAME: _____ DATE OF BIRTH: _____
ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
PHONE: (____) _____ E-MAIL: _____

In consideration for the above-named participant being allowed to participate at JOURNEY TO THE CROSS RODEO BIBLE CAMP in Garden City, KS, the undersigned agrees as follows:

1.) ACKNOWLEDGEMENT OF RISK: The undersigned acknowledges that activity related to livestock, rodeo, trail riding, and horsemanship events are dangerous activities and that participation in rodeo training activities and other related activities expose the participant to a substantial and serious risk of property damage, personal injury, and even death. Notwithstanding the risk involved, the undersigned expressly consents to the participant assuming such risk.

2.) RELEASE OF SPONSORS AND OTHERS: The undersigned being fully aware of the above mentioned risk releases and forever discharges the JOURNEY TO THE CROSS RODEO BIBLE CAMP COMMITTEE, their respective officers, directors, agents, staff, successors and assignees and anyone acting on their behalf, from any and all damages, costs, losses, claims, actions or causes of action of every kind and nature, whether past, present or future, arising out of or in any way connected with the participant's participation in or attendance of RODEO BIBLE CAMP.

3.) COVENANT NOT TO SUE: The undersigned covenant(s) that the below undersigned will not, now, or at any time in the future, directly or indirectly, commence or prosecute any action, lawsuit or other proceedings against the JOURNEY TO THE CROSS RODEO BIBLE CAMP COMMITTEE, their respective officers, directors, agents, staff, successors and assignees, or anyone acting on their behalf, for any damages, costs, losses, or claims of whatever kind and nature that arises out of or that are in any way connected with the participant's participation in or attendance of RODEO BIBLE CAMP and any such damages, costs, losses, or claims being hereby expressly waived, released, discharged and satisfied

4.) ASSURANCE: The undersigned has (have) full power, authority, capacity and right without limitation to execute, deliver and perform the agreements and covenants contained in this release and agree(s) to indemnify the RODEO BIBLE CAMP and all above mentioned committees and club officers and directors, agents, staff, etc. against all claims to the contrary.

5.) BINDING EFFECT: The agreements and covenants in this release shall be binding upon the undersigned, his/her heirs, personal representatives, insurers, successors, and assignees.

6.) VIDEO/PHOTOGRAPHY: I _____ hereby authorize the use of my or my child's portraits/negatives/digital files to be used in publication for purposes listed. The JOURNEY TO THE CROSS RODEO BIBLE CAMP reserves the right to use negatives and/or reproductions for purposes of display, exhibitions, contests, web and print publications and other purposes. Unless otherwise specifically stated herein, negatives and previews remain the property of JOURNEY TO THE CROSS RODEO BIBLE CAMP COMMITTEE and have the exclusive right to make additional reproductions from them for the client.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations statements or inducements apart from the foregoing written agreement have been made. WE HAVE READ THIS DOCUMENT. WE UNDERSTAND IT IS A RELEASE OF ALL CLAIMS. WE UNDERSTAND WE ASSUME ALL RISK INHERENT IN HORSE RELATED ACTIVITIES. WE VOLUNTARILY SIGN OUR NAME EVIDENCING OUR ACCEPTANCE OF THE ABOVE PROVISIONS.

IN THE EVENT OF THE SIGNATURE OF ONLY ONE PARENT OR GUARDIAN, SUCH PARENT OR GUARDIAN HAS THE AUTHORITY TO BIND BOTH PARENTS AND GUARDIANS WITH HIS / HER SIGNATURE. THE UNDERSIGNED PERSON(S) HAVE CAREFULLY READ AND UNDERSTAND THE TERMS OF THIS RELEASE AND HAVE VOLUNTARILY EXECUTED THIS RELEASE THIS _____ DAY OF _____, 2024.

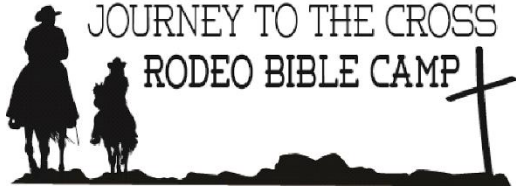
SIGNATURE 1 (Parent or Legal Guardian)
(Parent or Legal Guardian Name)

PRINT/TYPE

SIGNATURE 2 (Parent or Legal Guardian)
(Parent or Legal Guardian Name)

PRINT/TYPE

PARTICIPANT (Print or type Child's Name)



LIABILITY WAIVER NOTARIZED PORTION

STATE OF _____)

) ss.

COUNTY OF _____)

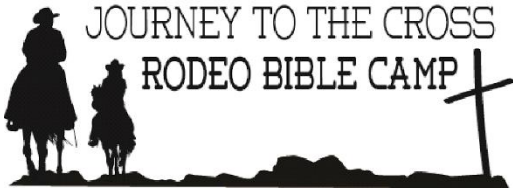
Subscribed and sworn to before me this _____ day of _____ 20 _____ by

_____ the contestant, _____, and

_____, parents or guardians.

Notary Signature and Stamp

My commission expires: _____



HEALTH RELEASE FORM

PARTICIPANT NAME: _____ DATE OF BIRTH: _____

GENDER: Male Female

Note to Parents: Every precaution will be taken to ensure that your child's stay with us is a fun and SAFE experience. Occasionally, people do get hurt. WE REQUIRE that you have INDIVIDUAL HEALTH INSURANCE to protect your child. In case of sickness or accident, please fill out the following health information completely and accurately for our camp records.

THIS HEALTH FORM RELEASE MUST BE SIGNED BY PARENT OR LEGAL GUARDIAN AND SENT WITH THE RODEO BIBLE CAMP WAIVERS!!!

DOCTOR & INSURANCE INFORMATION FOR PARTICIPANT

Doctor's Name: _____ Doctor's Phone #: (____) _____

Name of Insurance Company: _____

Group Policy Number: _____ Insurance Phone #: (____) _____

MEDICATIONS & MEDICAL HISTORY

- Please list ALL medications that your child is bringing to camp, include non-prescription items such as aspirin and vitamins, as well as prescription medications: _____

- Reasons for taking medications listed above: _____

- Does your child experience seizures: No Yes If yes, most recent occurrence? _____

- Has your child ever been knocked unconscious or passed out? No Yes If yes, when, and how? _____

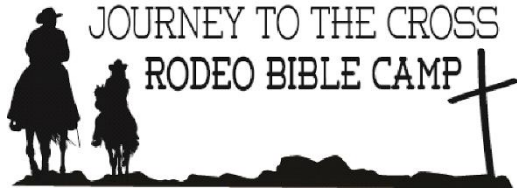
Date of child's last physician visit: _____ Reason? _____

- Date of child's last physical examination: _____
Doctor's Name: _____
- Year of last tetanus shot: _____
- Check any allergies/illnesses: Hay fever Insect Sting Asthma
 Diabetes Heart Problems Penicillin Anxiety Other _____
- List any other helpful medical information (i.e., recent surgeries, diseases, etc.):__

Please enclose a COPY of your Insurance Card(s) as PROOF of Insurance coverage. MANDATORY.

SIGNATURE (Parent or Legal Guardian)

PRINT/TYPE (Parent or Legal Guardian Name)



EMERGENCY & HEALTH CONTACT INFORMATION

PARTICIPANT NAME: _____

DATE OF BIRTH: _____

PARENT/GUARDIAN CONTACT INFORMATION

MOTHER'S NAME: _____ **EMPLOYER:** _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

CELL: (_____) _____ **HOME:** (_____) _____

WORK: (_____) _____

FATHER'S NAME: _____ **EMPLOYER:** _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

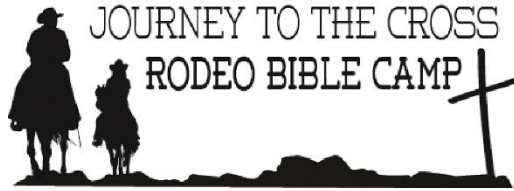
CELL: (_____) _____ **HOME:** (_____) _____

WORK: (_____) _____

EMERGENCY CONTACT IF PARENTS ARE UNREACHABLE:

NAME: _____ **PHONE:** (_____) _____

NAME: _____ **PHONE:** (_____) _____



HEALTH CARD

PARTICIPANT NAME: _____ DATE OF BIRTH: _____ [] Male [] Female

CONTACT INFORMATION

PARENT/GUARDIAN NAME(S): _____ Phone #: (____) _____

Doctor's Name: _____ Doctor's Phone #: (____) _____

Dentist's Name: _____ Dentist's Phone #: (____) _____

Name of Insurance Company: _____

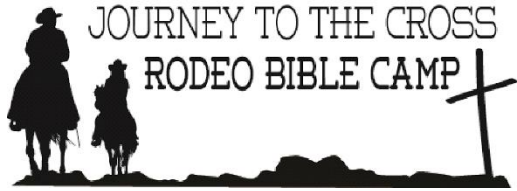
Group Policy Number: _____ Insurance Phone #: (____) _____

Check any allergies/illnesses: [] Hay fever [] Insect Sting [] Asthma [] Diabetes
[] Heart Problems [] Penicillin [] Anxiety [] Other _____

Please list ALL medications currently being taken by camper, allergies, or any special precautions to be taken by camper: _____

****Is this the child's first time away from home without a parent/guardian?****

[] Yes [] No



MEDICATION DISTRIBUTION

Authorization for Dispensing Non-Prescription Medications to Campers if Necessary

The camp nurse or other designated adult camper may need to administer a non-prescription, over the counter medication if your camper is experiencing a headache, soreness, seasonal allergies, hay fever, heartburn, itchy/red eyes, or other non-emergency ailment. If your camper is injured, is struggling to breathe, breaking out, or any other out-of-the ordinary issue is present, we will call the emergency contact listed to seek the best treatment option for your camper.

First & Last Name of Camper

DOB

I authorize RBC to administer the following over the counter items to my child if deemed necessary by RBC's Nurse or Designee during the course of RBC (please check which boxes you are allowing):

Tylenol

Benadryl

Ibuprofen/Advil

Claritin

Eye Drops

Zyrtec

Antacids

My camper is allergic to the following medication(s) listed above and in NO situation should they be administered them: _____

By signing this form, I allow the above medication(s) to be given to my child by the designated RBC person.

I understand that I will be contacted if there is a medical emergency, or any other medication deemed necessary that is not listed on this form.

Parent/Guardian Name & Signature

Date Signed