

2026 Camper Confirmation

Parent/Guardian & Camper Review Together

Camper Liability Waiver, Health Release and Medication Distribution forms need to be scanned and emailed to rodebiblecampgc@gmail.com. They must be submitted by June 5th, 2026, and must be on file before the child can participate in any camp activities. If you are paying for registration by check, mail those to Journey to the Cross RBC at 665 I. Lane Oberlin, KS 67749 as soon as possible.

It is require that we have a negative Coggins test on file for the horse your camper brings BEFORE your arrival. This test needs to have a sample/result date of 6/22/25 or later. These can also be emailed to rodebiblecampgc@gmail.com. Contact Camp Director – Tyrell Reynolds with any questions or concerns.

Camper Name: _____

Event: _____

This letter is written to confirm your registration for the Journey to the Cross (JTTC) Rodeo Bible Camp scheduled for June 18th to June 21st, 2026, in Garden City, KS. We are so excited that your camper will be joining us and hope that it is an amazing experience for them. Please read the packet and fill out the paperwork in its entirety.

- **PLEASE NOTE A NEW CHECK IN TIME THIS YEAR!** - Check-in will be held from 12:00pm-2:00pm on Thursday, June 18th.
- 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 21st 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 21st.
- Campers will be dismissed following a final stall check after the presentation of awards and baptisms on Sunday, June 21st, at approximately 5:30 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**
209 Lake Avenue, Garden City, KS 67846

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.



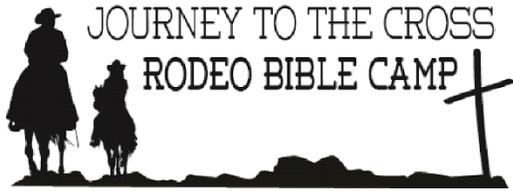
We suggest that all personal items be labeled before coming to camp!

- Sleeping bag/blankets, 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 HIGHLY 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 and pictures. Make sure to pack APPROPRIATE pajamas for walking from the showers to the sleeping quarters and for sleeping.
- BIBLE, notebook and pens/highlighters
- Flashlight, bug repellent, sunscreen.
- Horse with all available tack (i.e., extra bits, blankets, etc....) except for the Ground Horsemanship event. 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.
- Campers must bring a minimum of **2 bags of shavings per stall** (excluding Ground Horsemanship campers and Rough Stock campers). Campers will be provided with one bag of shavings from the camp. Shavings will not be available for purchase at camp.
- Stalls will be provided – only **ONE horse and stall per camper** is allowed.
- Rodeo gear – Necessary per your selected event. Ropes for team roping, breakaway, tie down, rigs for bull riding, etc. – If you are unsure of what to bring, contact Tyrell Reynolds before camp.
- NO ALCOHOL or TOBACCO – **PERIOD** - Should these substances be found on the premises or in a camper's possession, they may be sent home immediately.
- *****PLEASE LEAVE CELL PHONES AT HOME*** Cell phones can also be turned into camp administration at the beginning of camp.**



- WE MUST have a negative Coggins test for the horse your camper brings on file BEFORE their arrival.
- Campers are required to attend **ALL** scheduled activities and be ON TIME unless excused – worship, church service, event clinics, games, etc.
- Campers are not permitted to leave the fairgrounds at any time, unless they have the permission of the Camp Director.
- 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. Campers are required to sleep overnight in the designated quarters, NO sleeping OR showering in trailers.
- 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 and accompaniment of an adult counselor.
- It is expected that everyone will dress in a manner that is pleasing to God. Questions in this area should be directed to the Counselors and/or Camp Director. **No tank tops, low cut, cropped, or see through shirts. No shorts at any time except when worn as pajamas.** When working with horses and livestock, boots MUST be worn.
- 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 romantic physical contact between campers.
- 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 and awards are presented following the rodeo. 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.



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)

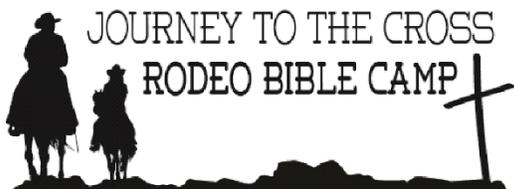
SIGNATURE 1 (Parent or Legal Guardian)
(Parent or Legal Guardian Name)

PRINT/TYPE

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

PRINT/TYPE

PARTICIPANT (Print or type Child's Name)



JOURNEY TO THE CROSS
RODEO BIBLE CAMP

HEALTH RELEASE FORM

PARTICIPANT NAME: _____

GENDER: Male Female

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

Yes No

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? _____
- 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.

PARENT/GUARDIAN CONTACT INFORMATION

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

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

WORK: (_____) _____

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

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

WORK: (_____) _____

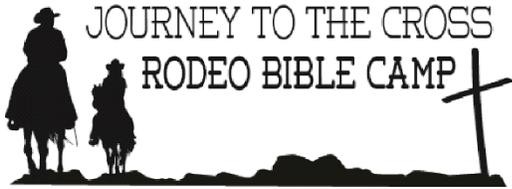
EMERGENCY CONTACT IF PARENTS ARE UNREACHABLE:

NAME: _____ PHONE: (_____) _____

NAME: _____ PHONE: (_____) _____

SIGNATURE (Parent or Legal Guardian)

PRINT/TYPE (Parent or Legal Guardian Name)



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):

- | | |
|--|-----------------------------------|
| <input type="checkbox"/> Tylenol | <input type="checkbox"/> Benadryl |
| <input type="checkbox"/> Ibuprofen/Advil | <input type="checkbox"/> Claritin |
| <input type="checkbox"/> Eye Drops | <input type="checkbox"/> Zyrtec |
| <input type="checkbox"/> 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