



Spring Mill Bible Camp

Located in the heart of Southern Indiana

2009

May 30-June 5 – College Week (High School Grads through 23 years old)

- Directors: Curt Parsley, Gary Spear

June 6 - Day Camp (Ages 5-7, 8:30 am - 3:30 PM)

- Directors: Jim & Camela Pierce

June 7-12 - Junior Session (Ages 8-11 years old)

- Directors: Steve Davis, Michael Walden

June 14-19 - All Age Session 1 (Ages 8-18 years old)

- Directors: Rick Leach, Linda VanBritson

June 21-26 - All Age Session 2 (Ages 8-18 years old)

- Directors: Brent Donoho, Randy Weillbaker

July 5-11 - Senior Session 1 (Completed grade 7-12)

- Directors: Bobby Davis, Brian Fuller, Larry Sawyer, Mike Welter

July 12-18 - Senior Session 2 (Completed grade 7-12)

- Directors: Daren Lugafet, Kyle Massey

July 19-24 – Intermediate Session (Completed grade 4-8)

- Directors: Brent Fields, Matt Sowders

July 26-31 - All Age Session 3 (Ages 8-18 years old)

- Directors: Pat Arthur, Bobby Davis

The goal of SMBC is to provide an enjoyable week of camp centered on God and the Bible. Our desire is to create an environment where everyone can grow spiritually and physically without worldly distractions.

Registration forms/information available at www.springmillbiblecamp.org

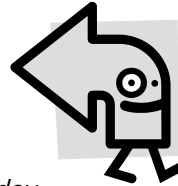
Questions regarding summer camp registrations should be directed to Beth Parsley parsley@dmrtc.net, (812) 388-5675 or TXT (812) 583-6692.

Fee Schedule (includes camp picture)

- \$100 **Early bird** (postmarked by May 15 for College session, June 1 for June camp sessions, July 1 for July camp sessions)
 - \$110 per session if pre-registered.
 - \$120 per session the day camp session begins.
 - *There is a \$10 non-refundable fee per registration.*
 - *No refunds after camp session has began*
 - \$10 Daycamp only (also includes canteen)
- Due to varied schedules of college age campers, reduced rates are available for partial-week attendance.
• Contact Beth Parsley parsley@dmrtc.net or TXT (812) 583-6692 for additional info.

Other costs: Canteen: \$6 to \$15 (canteen open 2 x day); Camp T-shirt: \$10 (T-shirt & canteen may be purchased at check-in)
Visitor meals: \$3 (must call ahead to notify camp cooks for meal reservations at 812-849-3111)

Check-in time: 2 pm to 4 pm EDT; 1pm to 3pm CDT



Important information!

Pick-up time: varies each week.

Check with director upon arrival at camp on check-in day.

- Registrations will not be taken by phone.
- 100 campers maximum per session on **first come, first served** basis
- Completed registration and full payment required to reserve session.
- *Campers wishing to attend multiple camp sessions must submit separate registration forms for each session.*

THINGS TO BRING: Bible, notebook, pencil, bedding, towels, toilet articles, swimsuit, week's supply of modest clothing, comfortable shoes (2 pair suggested), jacket, fan (1 only), flashlight, sunscreen

THINGS NOT TO BRING: Electronic entertainment devices (e.g., MP3 or DVD players, cell phones, radios, handheld games, etc.), firearms, tobacco, drugs, axes, fireworks, & knives. *Restrictions also apply to all visitors.*

ACTIVITIES: Campers shall participate in daily Bible classes, chapel, singing, campfires, sports (softball, basketball, volleyball, etc.), swimming (boys & girls alternate days), and Park Day.

DAYCAMPERS: Wear play clothes & shoes; bring a pillow & sheet.

Send personal mail during camp session to:



Spring Mill Bible Camp
"Camper's Name"
2830 State Road 60 East
Mitchell IN 47446

Do **NOT** send registration forms to this address.

*Rules for acceptance & participation in the program are the same for everyone regardless of race, color, sex, age, handicap, or national origin. Any person who believes he or she has been discriminated against in any USDA-related activity should write the Secretary of Agriculture, Washington, D.C., 20250.



Permanent Ink Only

Complete both sides of this page and return to:
 SMBC, PO Box 508, Mitchell, IN, 47446
 Do **NOT** send personal camper mail to this address

(PLEASE PRINT)

Full Name _____ Goes by _____

Gender M / F Age _____ Date of Birth ___/___/___ Grade (most recent level) _____

Email _____

Address _____ City _____ State ___ Zip _____

Home Phone (____) _____ Emergency contact(s) _____

Home church/congregation _____ Have you attended SMBC before? Y / N

COSTS: (Do not mail cash. Make check or money order payable to: **SMBC**, write campers names on memo line)

Camp Session Fee (\$100, \$110, or \$120) _____ \$ _____ *see fee schedule on prior info page*

Day Camp Fee (One day only, \$10) _____ \$ _____

Canteen Money _____ \$ _____

Camp T-shirt (\$10 each) _____ \$ _____

Total Amount Enclosed \$ _____



Circle size:

Youth sizes

S / M / L

Adult sizes

S / M / L / XL / 2x / 3x

CHOICE OF CAMP SESSION: (Mark 1st and 2nd choice)

A separate registration form must be completed for each session camper wishes to attend.

1st 2nd

____ May 30-June 5 (College)

____ June 6 (Daycamp)

____ June 7-12 (Jr)

1st 2nd

____ June 14-19 (AA1)

____ June 21-26 (AA2)

____ July 5-11 (Sr1)

1st 2nd

____ July 12-18 (Sr2)

____ July 19-24 (Int)

____ July 26-31 (AA3)

Everyone must comply with the Following guidelines!

1. Campers shall participate in all planned activities (including but not limited to devotionals, classes, recreation, etc.).
2. Girls are not allowed on the boys' side. Boys are not allowed on the girls' side.
3. Campers will keep cabins & campgrounds clean.
4. Campers will dress modestly **at all times** (Short-shorts and tank tops with straps less than 3" wide are NOT allowed!).
5. Infirmary Supervisor will keep track of all medications, including over-the-counter types.
 * Medications must be dispensed from ORIGINAL containers from the pharmacy, with dosage instructions. *
6. Campers cannot go to their cabin without a counselor & must stay in their cabin after lights are out.
7. Directors are responsible for their session of camp. Campers will **follow their rules** and treat staff with respect.
8. Electronic entertainment devices (e.g., MP3 or DVD players, cell phones, radios, handheld games, etc.), firearms, tobacco, drugs, axes, fireworks, and knives are not allowed at camp.
9. Campers must have the permission of the director & **sign out** before leaving camp.
10. Laundry facilities may **only** be used by counselors in an emergency.
11. Leave all personal valuables at home.
12. Harassment, intimidation and bullying will not be tolerated.

I agree to follow these guidelines. I understand that failure to do so may result in my being sent home. This agreement must be signed & returned with the camp registration.

Camper's Signature: _____

Parent/Legal Guardian's Signature: _____

****All medical information will be kept confidential.****

Insurance Information & Health Screening

Medical Insurance Carrier _____ Policy Id# _____ Exp Date ____/____/____

Family Doctor _____ Phone _____

Medical history/existing conditions _____

Medications _____

Please bring all medications in their ORIGINAL container with dosage instructions.

Surgeries _____

Allergies (medications, latex, foods, environmental, bee stings, etc.) _____

Glasses / Contacts / Hearing aids / Braces / Retainer / Other: _____

Last Tetanus: Less than 5 yrs 5-10yrs Over 10 yrs Immunizations up to date: yes no Weight: _____lbs

No Top bunk __ Limitations on activity _____

**As required by ISDH Rule 410 IAC 6-7.2-17, each camper must undergo a basic health screening within twelve (12) hours after arriving at camp. The purpose of this screening is to identify any illness, injury or communicable disease, and shall include a check of any medications.*

Approved for the following over-the-counter medications or their generic version (please circle):

All / pain reliever (Tylenol/Advil) / antihistamine (Benadryl) / decongestant (Sudafed) / antibiotic ointment / hydrocortisone cream
calamine / cough suppressant (Robitussin/cough drops) / antacid-antigas (Mylanta/Maalox/Tums) / anti-diarrheal (Imodium) / milk of magnesia

**LEGAL AGREEMENT WITH PARENT/GUARDIAN
& CONSENT FOR MEDICAL TREATMENT OF MINOR**

It is necessary for a parent/guardian to assume the responsibility for the registrant. The following is a legal agreement for this purpose that the parent or guardian must sign and return with the registration.

(Please Print) I, _____ of, _____
Parent/Guardian Address

City _____ State _____ Zip _____

do hereby state that I am the parent or legal guardian of, _____
Child's Full Name

a minor, age _____, born ____/____/____

In consideration of the acceptance of the above registrant we covenant and agree with Spring Mill Bible Camp, that we will at all times hereafter indemnify, keep indemnified and save harmless the said Spring Mill Bible Camp, or which it may be brought against or claimed against the Spring Mill Bible Camp, or which it may pay, sustain, or incur as a result of illness, accident, or misadventure to the above registrant, during the period said registrant is a participant in the Spring Mill Bible Camp. In case of an accident or sickness, I hereby authorize the Camp Director or Infirmary Supervisor to sign consent for treatment of the registrant by a doctor, or be admitted to the hospital.

I will be personally responsible for expenses incurred for reasonably necessary medical treatment for the registrant effective for the dates of ____/____/____ to ____/____/____.

(x) _____ Date: _____
Parent/Guardian's Signature