

# Glad Tidings Bible Camp

Transforming lives for Christ through Bible training, lifestyle, and a positive camping experience.

## 2008 Camp Registration

**Week Attending:** \_\_\_ Sr. Hi - June 16-21 (Grades 9-12)  
\_\_\_ Jr. Hi - June 23-28 (Grades 7-8)  
\_\_\_ Jr. 2 - July 7-12 (Grades 5-6)  
\_\_\_ Jr. 1 - July 14-19 (Grades 3-4)

**Primary Camp**  
Primary Camp, May 28-29 (Kdg. - 2<sup>nd</sup> Grade)  
Begins at 9 AM on 28<sup>th</sup> & ends at 3 PM on 29<sup>th</sup>  
Cost for Primary Camp is \$25  
Parent can attend for free (if child needs them)

**Check In / Out** Camp Check-in: Monday 2-4 pm (Please do not come before 2 pm) Check-out: Saturday 1 pm

**Cost: \$95** per child per week

- We would appreciate pre-registration and pre-payment.
- If you pre-register and pay by June 1<sup>st</sup>, you will receive a free Glad Tidings 2008 T-Shirt.  
(Free T-shirts are not included for Primary Camp – but can be ordered during Primary Camp)
- You may choose to wait and pay when you come to camp, but we would appreciate your pre-registering by June 1<sup>st</sup>.
- By waiting to pay at camp, you will not receive the free shirt. Shirts will be available to purchase while supplies last.
- Non-pre-registered campers are always welcome if there is room available.
- For families with more than 1 child attending, you may deduct \$10 from each younger brother / sister registration.

We greatly desire for every camper who wishes to attend to be able to do so despite financial concerns. Therefore, if your family is unable to afford the cost of the camp, please contact the camp regarding our scholarship opportunities. A parent or guardian should contact the camp: Glad Tidings, 89238 544 Ave., Bloomfield, NE 68718 for a scholarship application (1-402-373-4433).

**Please Save This Top Portion ~ It has important Information You Will Need!**

**The Parent / Guardian must complete the registration form and sign the Medical Release Form on the back of this page. Please mail the form or bring it to camp with the camper. Without it, the camper will not be able to attend.**

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Week of Camp Attending: Primary Jr 1 Jr 2 JH SH T-Shirt Size: Child: M L Adult: S M L XL 2X

Church Name: \_\_\_\_\_ Church Phone: \_\_\_\_\_  
Church Address: \_\_\_\_\_

Have you Attended Glad Tidings Previously? \_\_\_Yes \_\_\_ No Grade this fall \_\_\_\_\_ M \_\_\_ F \_\_\_

Do you have a brother / sister attending Glad Tidings Bible Camp this year? \_\_\_\_\_

Brother / Sister's Name _____	Week attending _____
Brother / Sister's Name _____	Week attending _____
Brother / Sister's Name _____	Week attending _____

### For Office Use Only

Registration Received: _____	Fees before Discount: \$ 95.00	Check # _____
T-Shirt: Yes _____ No _____	Less Sibling Discount \$ _____	PAID: _____
	Less Pre-payment \$ _____	
	<b>Payment Due:</b> \$ _____	

Mail This Bottom Portion of the Registration Form To:

Glad Tidings Bible Camp 89238 544 Ave. Bloomfield, NE 68718-4100  
E-Mail: [mvchasegtbc@gpcom.net](mailto:mvchasegtbc@gpcom.net) or [mvchase2@juno.com](mailto:mvchase2@juno.com) Phone: 1-402-373-4433

**A word to parents / caregivers of our campers:** We take very seriously your entrusting your child to us for a week. We strive to live up to that trust by insuring a safe and fun environment for all campers. Please help your camper come prepared according to the following list: We believe this will help each camper to have the most enjoyable and profitable experience at Glad Tidings. While our main emphasis is not on a child's appearance, we do expect our staff and campers to dress modestly and maintain cleanliness.

### What to Bring to Camp

Your Bible, a notebook, pencils; bedding (a sleeping bag is fine); personal belongings (towel, soap, toothbrush, shampoo, etc.); some spending money for the canteen; payment for your week (if not prepaid); "play clothes" (casual shirts, T-shirts, jeans, and modest shorts); an extra pair of shoes for "grubbier" activities; modest swimsuit; jacket or sweater for occasional cool nights. (Sr. High campers may want to bring "nice" clothes for the Friday night banquet.) It is advisable to have the camper's clothes and belongings marked with their name. Please do not bring food, snacks, or pop.

Medications must be in the original labeled container, clearly marked with the camper's name. Placing them in a marked Zip-lock bags would be helpful. Medications (according to Health requirements by the State of Nebraska) must be turned over to our Camp Medic or director who will see they are dispensed at the right times.

Since our purpose is to provide a specific setting and program, we ask that no cell phones, radios, MP3 players, Discman's, electronic games, etc. be brought to camp. Any of these items brought to camp, along with anything determined to cause distraction to others or be a safety concern, will be held in a safe place by the Camp Director and returned to the camper at the end of his week of camp. The best way to reach your child is to call the camp phone number: 402-373-4433).

**Primary Camp Info:** Enjoy two days and one night at Camp Glad Tidings – Bible classes, skits, games, crafts, and great food. Our staff will supervise the children at all times. These campers need to bring 5 (or more) changes of clothing. Parents may stay or visit at no additional charge. Parents: Please bring everyday and work clothing. Activities and work projects are planned for parents, also. Note "What to Bring to Camp" above.

Web Site: [www.gladtidingsbiblecamp.org](http://www.gladtidingsbiblecamp.org)

**Please fill in BOTH sides and mail in portion below:**

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Name \_\_\_\_\_ Age \_\_\_\_\_ Date of last tetanus shot: \_\_\_\_\_  
Address \_\_\_\_\_  
E-Mail Address \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Other medical information \_\_\_\_\_

**Parental Medical Release Form (Must sign & date – also include a copy of the insurance card for camper)**

I, \_\_\_\_\_ authorize Camp Glad Tidings staff, Sacred Heart Hospital, or Emergency Medical personnel to: (1) administer medication and first aid and/or (2) make emergency medical decisions in my absence when necessary for my son / daughter here named: (name) \_\_\_\_\_

Important medical info (Allergies, Asthma, Diabetes): \_\_\_\_\_

I understand that Glad Tidings Bible Camp provides secondary insurance only. I realize my insurance will be billed for any medical treatment as the primary coverage for my child.

Camper's Insurance Company: \_\_\_\_\_ Policy # \_\_\_\_\_

Party Responsible for Insurance Billing Purposes: \_\_\_\_\_ Phone \_\_\_\_\_  
(Signature)

In case of emergency, I may be reached at:

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_