



Camper Information

Camper Full Name _____ Sex **M / F**

Street Address _____

Mailing Address _____

City _____ State _____ Zip _____

Date of Birth _____ Age _____ Grade Entering Fall 2024 _____

Is the Camp Immersed (baptized)? Y/N _____

*Parent email(s): _____

Home Phone _____ - _____ - _____

Father's Name _____ Cell Phone _____ - _____ - _____

Mother's Name _____ Cell Phone _____ - _____ - _____

Custodial Parent(s) _____

Name & relationship of person registering camper if different than above _____

Church You Attend _____

Minister's Name & Phone _____

Camp Session Selection _____

Roommate Preference(s) (up to 2 names) _____

Camp Session Picture \$8: Y/N

The following person(s)/organization(s) have my permission to pick up the camper indicated above. _____

Email addresses will be used to email you information regarding your camper's session, additional consent forms, and camp updates.

FREE T-shirt

Must register by May 1 for T-shirt. Available to purchase in Camp Store.
Please circle size:

CHILD: Small Medium Large

ADULT: Small Medium Large XL 2XL 3XL

Consents

*I hereby give permission to Lake James Christian Assembly, INC. (LJCA, INC.) to hospitalize, secure treatment for and to order anesthesia or surgery for my camper child. I understand, however, that every effort will be made to contact me in case of such an emergency, if possible, before any such treatment is administered. I hereby release LJCA, INC. from any responsibility other than normal supervision and care. In case of accident, I will not hold LJCA, INC., its staff, faculty, management officers or affiliated churches liable. *I certify that all information given is complete and correct to the best of my knowledge. *I understand that camp accident insurance is secondary. *I understand that there are inherent risks involved in my child participating in camp, such as but not limited to, falls, accidents (on land and in water) and exposure to communicable diseases.

*I DO NOT want my camper to participate in these sports: Air Rifle Target Archery Archery Tag

*I DO NOT authorize LJCA, INC. to take and use any photograph or video of the camper named on this registration as may be needed for its records or public relations.

*I DO NOT allow the camper named on this registration to be photographed in the group picture.

Parent/Guardian Signature _____

Date _____

***Must be signed before registration will be processed!**

Medical History

All information provided below is kept confidential by
Lake James Christian Camp per HIPPA requirements

General Emergency Information:

Emergency Contact _____

Relationship to Camper _____ Phone # _____ - _____ - _____

Family Physician/Pediatrician _____ Phone # _____ - _____ - _____

Health Ins. Co _____ ID _____ Group _____

Insured's Name _____ Insured's DOB: _____

Year of last tetanus _____ Current on all immunizations? **Y/N**

Any food, medication, insect or other allergies (Not seasonal) **Y/N**

If yes, please answer the following:
Please list allergies to FOOD(s), severity of reaction and management:

Please list OTHER ALLERGIES (Not seasonal), severity of reaction and management:

Medical condition(s) or history and special health/behavioral/physical considerations or limitations to be aware of. For example, if your child has an IEP or 504 plan in the public school setting, it would be helpful for the camp nurse to know this. Nothing/NONE marked indicates the camper has no medical conditions and is capable of full participation.

Please circle any medical conditions that apply:

allergies	depression	physical limitations
anxiety	diabetes	seasonal allergies
asthma	eczema/skin rashes	shortness of breath
bedwetting	earache history	sleepwalking
behavioral problems	emotional problems	urinary issues
bleeding history	heart history	OTHER (describe below)
bowel issues	menstrual difficulty	NONE
contagious infections/ contagious conditions	nosebleeds	

Medical Condition(s) Explained: _____

Recent surgery, injury or permanent conditions that may restrict this camper's activities: _____

Any recent life changes? (death, divorce, homesickness, etc.): _____

These over-the-counter medications are stocked at LJCA, used to help manage common illness or injury, and dispensed by standing orders signed by the camp's supervising physician. Some meds are listed as common brand names, though generic may be substituted. Acetaminophen, aloe vera, ibuprofen, antacid (Tums & Mylanta), antifungal spray, burn gel, Zyrtec, Benadryl (oral & ointment), EpiPen (used for anaphylactic reaction), hydrocortisone cream, Lanacaine 1st aid spray, Immodium Ad, Gold Bond medicated powder, Midol, pain relief/ointment (Bengay/Biofreeze), Milk of Magnesia, Miralax, Nix, Sudafed, swimmer's ear drops, throat lozenges, tussin, tussin DM, triple antibiotic ointment, bacitracin ointment, Calamine lotion, orajel, sunscreen, docusate sodium (stool softener), Visine AC

*Please list medication(s) you **DO NOT** want your child to have: _____

MEDICATIONS: (continue on additional pages if necessary) _____

Note: *All medications brought to camp, prescription or over-the-counter, MUST be in their original containers with the camper's name and turned into the camp nurse on arrival.

Office Use Only

Date Rec. _____ Rec. By _____ Input By _____

CAMP SESSION # _____ PRICE \$ _____ Picture \$8 Y/N

Church Sponsorship amt: _____ Treesh MF amt: _____

Balance Due: _____ Refund Due: _____

CK# _____ CK Date _____ CK Amt _____ Cash Amt _____



Register by May 1

FREE T-shirt

Early Bird Price



Date	Camp & Camp Session #	Entering Grade	Early Bird Price	Regular Price
June 26	Day Camp	1	\$40	\$40
July 7-8	Jumpstart	2-3	\$100	\$120
June 23-25	1st Chance 1	2-3	\$175	\$195
June 26-28	1st Chance 2	2-3	\$175	\$195
June 9-12	Pre-Teen Boys Fishing	4-6	\$190	\$210
June 9-14	Pre-Teen 1	4-6	\$285	\$305
June 16-19	Pre-Teen 1 Girls Horse Camp	4-5	\$300	\$320
June 23-25	Pre-Teen Girls Wilderness	4-6	\$190	\$210
June 26-28	Pre-Teen Boys Wilderness	4-6	\$190	\$210
July 7-10	Pre-Teen 2 Girls Horse Camp	4-5	\$300	\$320
July 14-19	Pre-Teen 2	4-6	\$285	\$305
June 30-July 3	Boys Farm Camp	5-7	\$300	\$320
June 9-12	Jr. High 1 Girls Horse Camp	6-8	\$300	\$320
June 16-21	Junior High 1	6-8	\$285	\$305
June 16-21	Junior High Girls Wilderness	6-8	\$310	\$330
July 7-12	Junior High 2	6-8	\$285	\$305
July 7-12	Junior High Aquatics	6-8	\$360	\$380
July 14-19	Junior High Boys Wilderness	6-8	\$310	\$330
June 23-28	High School Girls Horse Camp	9-12	\$350	\$370
June 30-July 5	High School	9-13	\$285	\$305
June 30-July 5	Deeper Track (w/High School Camp)	9-13	\$285	\$305
June 30-July 5	High School Aquatics	9-13	\$360	\$380

Church Registration Contact: _____

Church Sponsorship Code (If Applicable): _____

Lunch at the Lake/Camp Open House:

Sunday, May 5 from 12:00-2:00pm

Bring your friends, tour the camp facilities, and register for camp!

RSVP: info@ljca.org or call 260-833-2786



Masterpiece

Eph 2:10

Summer 2024

LakeJames
CHRISTIAN CAMP
& RETREAT CENTER



March 1 @ Midnight Registration Opens!

www.ljca.org