2022 Camp Leader & Camp Leader in Training (CLT) for Boys Camp

Date: August 4 (registration 4:30pm) through August 7 (closing at 2pm)

Where: Camp Wo-Me-To, 1200 Knopp Rd, Jarrettsville, MD 21084

Who: Boys completed grade 7 (Camp Leader in Training (CLT) thru adult

Cost: \$105.00 (CLT cost will be paid for by the camp.)

Registration/payment deadline July 16, 2022



Please mail completed form with full payment to: , PO Box 160, Jarrettsville, MD 21084.

Make checks or money orders payable to: Camp Wo-Me-To

For additional information please contact: Monica Cole, mcole633@gmail.com

Camp Leader/CLT: No one under the age of 18 requires a background check. Every camp leader/staffer/adult attending over 18 years old must have the appropriate background check submitted by the July 16, 2022 deadline. Please use the following link for background check. https://ministryopportunities.org/BaptistCM. You must be rescreened every year. Background checks from other organizations will not be accepted. There are no exceptions.

PLEASE PRINT CLEARLY

	Leader		CLT)	Name					Age	<u> </u>
					_ City			State	Zip	
Preferred	d Phone Nun	nber			(Circle o	ne) home	cell Last g	rade cor	mpleted	
Parent/G	iuardian Nan	ne					Email			
T-shirt siz	ze: Small		Mediu	m La	rge	X-Large	2XL		_3XL	-
Name of	parent/Guai	rdian aı	uthorized	to ick up staff	er under 18					
Are you a	a Christian? _	c	hurch me	mber?	Church's nai	me?				
Is there a	anything tha	t would	prohibit	full participat	ion in the ca	mping prog	gram?	If ye	s, please list s	pecifics
	-			on we need in , or gluten fre	_	pwalking, b	edwetting,	and foo	od allergies. P	lease

Refunds and Cancellations: A refund will be granted only if for medical necessity accompanied by a doctor's note.

Early departure: Staffers under 18 must have a signed note if they need to leave camp early for any reason. It must be sent in advance to the camp director or given to the camp director during onsite registration.

Checkout from Camp: All staffers **MUST** checkout with the camp director before leaving camp. Camp Leaders-intraining under 18 must depart with an authorized parent/guardian.

Personal Medical Information

Please attach a copy of the FRONT and BACK of your insurance card. Insurance information is required for Camp admission.

Camp Leader (or CLT)									
List any medical diffic	ulties for	which	staffer	is	currently	being	treated: -		
Check and give dates for condition	ns which the st	taffer has e	experienced	l: asth	ma	seizures			
ear infections heart	disease	c	liabetes _		dizziness		hay fever		
Current medications: Fill out at needed, please sign the authoriza					_		o medication is		
Emergency contacts:									
Name			P	hone _					
Name			P	hone _					
Primary Care Physician			P	hone _					
Permission for treatment (if un permission for the camp's health,	-	•			•	•			
Acetaminophen (Tylenol)	Ibuprofe	Ibuprofen (Motrin, Advil)				Antihistamine (Benadryl)			
Imodium AD	Mild lax	Mild laxative (Ex-lax)				Antacid (Mylanta)			
Calamine lotion	Sore Thr	roat Lozen	ge						
**Staffer/Parent (if under 18) sign	nature					Da	te		
Authorization (if under 18) for	medical trea	tment, su	ınscreen u	se and	d application	n, and me	dia release.		
Due to COVID-19, a screening with cannot be registered to stay for contact me. In the event I cannot leader in charge to secure proper medications for my child.	camp. IN CAS t be reached,	E OF EME I hereby g	RGENCY, I i	unders nissior	tand that even	ery effort cian select	will be made to ed by the adult		
Sunscreen containers must be cle in. We highly recommend SPF assistance is needed it will be pro	30 spray sun	screen. S	staffer's sho	ould a	pply the sun		•		
I hereby give WMU of MD/DE a statements and testimonial notes posting, or any other business pu them to use any images or declar	of my child or rposes conduc	myself for ted by the	any media WMU of M	, advei 1D/DE	rtising, publici and Camp W	ity, commo	ercial, Facebook I agree to allow		
I hereby give WMU of MD/DE and	l Camp Wo-Me	e-To permi	ssion to use	e my ei	mail as a cont	act for upo	coming events.		
**Camp Leader (or /Parent (if und	der 18) signatu	re					_ Date -		
Print name									

Medication & Authorization for Swimming (sign below):						
Cabin assig	nment (comp	leted by can	np personne	el only):		
Medicine	Dosage	Morning	Noon	Evening	Other	As Needed
	•		·		·	
Inhalers and	EpiPen will ren	nain with coun	selors at all ti	mes.		
Prescription instructions.	medicines mus	t be in original	pharmacy pa	ckaging and wi	ll only be disp	ensed per doctor's
Non-prescrip instructions.	tion medicines	s must be in (original packa	aging and will	only be dispe	ensed per package
Authorization	for Swimming					
the deep wate	· · · · · · · · · · · · · · · · · · ·	imming test by	our lifeguards.	-	•	o want to swim in Il times. No camper
Check one: Ad	dvanced Swimme	er 🗆	Average Sw	vimmer □ Non-	-Swimmer \square	
		is grant	ed my permissi	on to go swimmi	ng while attend	ing camp.
** Staffer/Parent (if under 18) signature Date						

What to Bring

Camp Leaders (or CLT) Camp Checklist

□ Bible
☐ Sleeping bag or twin sheets/blanket/pillow
☐ Toiletries/personal hygiene items
☐ Towels (one for bathing, one for swimming) and wash cloth
□Swimsuit
☐ Changes of clothes/ rain jacket
\square Tennis shoes and creek shoes/strapped sandals (to be worn in
shallow water)
☐ Sunscreen (preferably SPF 30 spray)/insect repellent
\square Medications (to be administered by staff only). Inhalers and
EpiPen will remain with campers at all times.
☐ Pencil/pen/marker
□Flashlight
☐Personal hand sanitizer
☐Masks coverings (2 N95 or 2 KN95 recommended

COVID GUIDELINES

In order to limit the possibility of COVID-19 entering Camp-Wo-Me-To property, we will be screening all guests before entry for all camps/programs. This will include:

- 1. All campers, counselors, and staff will be required to show a negative PCR COVID test done within **72 hours** of arriving at camp.
- 2. All campers and adult participants will sign a medical release and complete a health questionnaire within 72 hours prior to arriving at camp stating that they exhibited no symptoms associated with COVID-19 during the 14-day period leading up to their arrival at Camp-Wo-Me-To. This includes a statement that also verifies that they have not been a close contact with a positive case of COVID-19 within the past 14 days. This form will be located on the website (link). Camp registration is not complete until registration is paid in full.
- 3. All participants staying at camp will have a daily temperature check in the morning. Anyone with a temperature higher than 100.3 or possible symptoms will be isolated and not be allowed to remain at camp.

These guidelines are subject to change in alignment with the CDC and MD Health Department recommendations.