Jr./Sr. High Youth Camp 2017 "Surround" Monday, June 19 - Friday, June 23

Therefore, since we are surrounded by such a great cloud of witnesses, let us throw off everything that hinders and the sin that so easily entangles. And let us run with perseverance the race marked before us, fixing our eyes on Jesus, the pioneer and perfector of our faith. For the joy set before him

he endured the cross, scorning its shame, and sat down at the right hand of the throne of God. Consider him who endured such opposition from sinners, so that you will not grow weary and lose

heart

Hebrews 12.1-3

Youth Pastors, Youth Leaders, and Pastors,

It is no secret that in today's world we are surrounded by a multitude of people, things and choices. It seems that it is getting harder and harder for our students to surround themselves with things that will make a positive influence. It seems that every time you turn on the television, the radio, or even walk into the schools, the world hits you right away and you become surrounded by what Satan uses to distract from what God wants.

The good news is that we have an example and we have a choice to what we choose to surround ourselves. This year, at our Oklahoma Church of God Youth Camp, we want to take the week, where distractions will be few, and help the students understand that they have a choice with their surroundings. We hope you join us as we learn the importance of our surroundings.

Please feel free to contact any of the board members, listed below, with any questions.

## General Info

Price: \$155 before May 23rd - \$175 on-site

Refund Policy: No refunds! We pay for facilities, supplies and food based on registration numbers. It is unfortunate if a student registers and cannot attend, but our preparation costs are non-refundable. We know you will understand, we just want to communicate clearly. If another student wants to come in their place we will gladly transfer registrations.

Camp Address: 2901 S Camp Bond Rd, Tishomingo, OK 73460 Phone: (580) 384-5756

Registration Address: Jonathan Greer, P.O. Box 790 Sapulpa, OK 74067

If you have any questions feel free to contact Jonathan Greer at (918) 407-8921 or any of the others on the board (Tim Busch, Tacie Dressen, Jared Fields, and Tim Hellar).

We look forward to seeing you at camp!

HOUTH

## Student Registration Form Junior & Senior High Youth Camp June 19-23, 2017

Last Name	First Name		MI
Address	City	State	Zip
Home Church	Youth Pastor/Youth Leader		
Date of Birth	Gender (circle one) M F G	rade (Fall 2018)	
T-Shirt Size (circle one) XXL XL L M	S *No Youth Sizes		
Please check if w	e can post your picture on s	ocial media	
Student Signat	ure Parent S	Signature	_
Therefore since we are surrounded h			<u> </u>

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heart. Hebrews 12:1-3

TOUTH

## Oklahoma State Youth Medical/Insurance/Permission/Liability Release Form

(Please print)

Parent/Guardian Name				
Address	City		_State	Zip
Insurance Company Name		Group No		
Insured Person's Name		Identification I	No	
Primary Doctor's Name	ry Doctor's NamePhone			
Medications & Dosages Child is currently taking or e	existing Medical C	onditions/Allergies: _		
Mom's Work	Mom's Cell			
Dad's Work	Dad's Cell			
If no one can be reached at the numbers above, please	contact		at	

This signed form does hereby give permission for our (my) child to attend and participate in all activities (including any off-site outings) of this event sponsored by the Oklahoma Assembly of the Church of God State Youth Council. We (I) authorize an agent of the Oklahoma Assembly of the Church of God State Youth Council, in whose care the minor has been entrusted, to consent to any X-Ray examination, anesthetic, medical, surgical, or dental diagnosis or treatment, and hospital care, at my expense, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act or the medical staff of a licensed hospital, whether diagnosis or treatment is tendered at the office of said physician or at said hospital. We (I) also authorize camp personnel to dispense over the counter medication: Tylenol, antacid, etc. Should it be necessary for our (my) child to return home due to medical/physical reasons, discipline problem, or otherwise, the signature party shall assume all transportation costs. The signature does also hereby give permission for our (my) child, should it be necessary, to ride in any vehicle designated by the adult leaders in whose care the minor has been entrusted while attending and participating in activities or for the purpose of transporting said child to needed medical assistance. We (I) agree to waive liability and hold Camp Bond, the Oklahoma Assembly of the Church of God, the State Youth Council, and all counselors and designated leaders and their local church harmless and blameless for any accidents and related damages or injuries that might occur during this event, or traveling to and

## We (I) have read and understand the rules of the camp. We (I) agree that our (my) child shall be expected to abide by them or be sent home at our (my) expense.

Parent/Guardian Signature	Date
Student Signature	

from the event, except for clear acts of gross negligence.