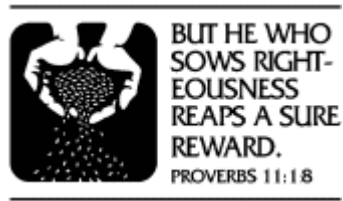


Camp Helper Application
Americus District Youth & Children's Camp at Dooly
FARM TOWN
June 24-27, 2010



Name: _____

Address: _____

City _____ State _____ Zip _____

Best phone number: _____

Email: _____

Home Church: _____

Pastor or Youth Minister reference: _____

Pastor or Youth Minister's phone #: _____

T-shirt size: _____

As of August 2010 I am in (circle one): 10th grade 11th grade 12th grade

In caring for campers, we believe it is our responsibility to provide a camp staff that is able to promote healthy, safe, and nurturing Christ centered relationships. Please answer the following questions. Any special concerns should be discussed with the Camp Director, Rev. Billy Kimbrel.

Do you believe in Jesus Christ as Lord and Savior? Yes ___ No ___

Do you have the spiritual gifts, personality, talents, abilities and desire to help you effectively work with children and youth? Yes ___ No ___

Have you ever been accused or convicted of any form of child abuse? Yes ___ No ___

Have you ever been convicted of a felony? Yes ___ No ___

I have also read and agree to the following statements regarding camp:

- All rising 10th, 11th and 12th graders will serve as helpers to adult counselors.
- All helpers must attend a training session. Please mark the session you will attend.

___ Americus UMC May 12, 2010 – 7:00 pm – 8:00 pm
___ Cordele UMC May 12, 2010 – 6:30 pm – 7:30 pm
___ Perry UMC May 15, 2010 – 11:00 am – 12:00 noon

Please plan on arriving at Dooly Campground on Thursday, June 24th at NOON. We'll have lunch and get ready for the campers, who will arrive between 3:00pm and 6:00pm on Thursday afternoon.

All camp staff will be needed from 12:00 noon on Thursday, June 24, until 2:00 pm on Sunday, June 27. Camp will conclude on Sunday, June 27th following the morning worship service in the Tabernacle. **Early pick up for campers will begin at noon on Sunday; late pick-up is at 1:30pm.**

Thank you for being a part of Youth and Children's Camp at Dooly Campground!

The information contained in this application is correct to the best of my knowledge. I understand that the Camp Staff will consider the personal information in this form confidential.

Signature _____ Date Submitted _____

Pastor _____ Date Submitted _____

Return this application by **May 7, 2010** to:

Rev. Billy Kimbrel Church: 478-987-1852
PO Box 73 Cell: 478-918-5304
Perry GA 31069
Email: bkimbrel@gmail.com

Helper Medical Information Form

Contact Information			
Name:			
Address:			
City:	State:	Zip:	
Age:	Grade:	Gender:	DOB:
Home Phone:	Church Phone:	Pastor's Phone:	
Mother's Name:		Address:	
Mother's Phone:	Office:	Cell:	
Father's Name:		Address:	
Father's Phone	Office:	Cell:	
Emergency Contact (other than parents):			
Address:			Home Phone:
Office Phone:		Cell Phone:	
Insurance Information			
Subscriber Name (Name in whom insurance is listed):			
Insurance Carrier:			
Insurance Number:			
Address for claims:			
*Please photocopy front and back of your insurance card and attach to this form.			
Medical Information			
<i>*Any medication needs to be labeled and in a zip-lock bag. These are to be turned in with instructions at registration.</i>			
Drug Allergies:			
Medication taken on a regular basis (list below or attach a list):			
Medication:	Dosage:	Times:	
Medication:	Dosage:	Times:	
Medication:	Dosage:	Times:	
Physician's Name:			Phone:
Date of last Tetanus/Booster:			
Parental Consent			
<p>This health history is correct to the best of my knowledge _____ has my permission to engage in all camp activities except as noted on this form. I hereby give permission to the Dooly Camp Director and counselors to consent for medical treatment by a physician or hospital on the above listed minor child. I agree to release any and all records necessary for insurance purposes. I give permission to the camp staff to arrange necessary related transportation for said camper.</p>			
Signature of Parent/Guardian:			
Printed Name:			Date:
*Please attach a list of any food allergies, dietary restrictions, or any other restriction.			



Camp Dooly Check List

Here's what to bring to Camp . . .

Overalls or Farm attire (straw hat or bandana) for the costume party
Shoes you can wear in the pool, your feet will thank you
Bed linens/sleeping bag
Pillow
Towels for bathing & swimming
Shower shoes/flip flops
Personal hygiene items
Insect repellent and sunscreen
Casual clothes for Thursday thru Sunday
Swim suit – ladies, please wear one piece swim suits
Laundry Bag
Your Bible

Directions to Camp Dooly:

From Vienna travel west on Highway 90 about 4 miles until you cross bridge over Sandy Mount Creek, take the first right past the bridge onto Pleasant Valley Road (watch for Dooly Campground sign). Take next right at Campground Road and follow signs into Dooly.

Check-in on Thursday the 24th

3:00pm to 6:00pm

Pick-up on Sunday the 27th

Early pick-up at **noon** (following worship in the tabernacle)
Late pick-up at **1:30pm** (for folks attending area churches)

Camp Phone Numbers:

Camp Dooly (kitchen phone): 229-268-2263
Camp Director's cell (Rev. Billy Kimbrel): 478-918-5304
Dooly Campground Director (Stacey Peavy): 229-268-4393