

THE FOLLOWING CAMPER HEALTH HISTORY MUST BE FILLED OUT COMPLETELY  
An incomplete history, including signatures, is cause to refuse or delay acceptance of your application.

	Yes	No
Appendicitis		
Asthma		
Does the camper use an inhaler?		
Convulsions		
Menstrual Problems		
Digestive Problems		
Ear Trouble		
Emotional Trouble		
Epilepsy		
Heart Trouble		
Back or Neck Problems		
Surgery within the last 2 years		
Type of Surgery:		

	Yes	No
Hernia		
Lung Problems		
Skin Problems		
Diabetes		
Mononucleosis		
KNOWN ALERGY TO:		
Penicillin		
Other Drugs		
Insect Stings		
Foods		
Are Childhood Immunizations Current?		
Last Tetanus Shot		
Measles Immunization		

Does the camper swim? Circle YES or NO  
Camper Restrictions (As limited by physician—including diet): \_\_\_\_\_

Describe any concerns the camp staff should know about your child. (Continue on a separate sheet if necessary.)

Health Insurance: circle YES or NO : if Yes, please attach a copy of your Health Insurance Card—front and back sides, thank you.

Parent/Guardian: Please Read and Sign Below

The above Health History is correct. I understand the inherent risks involved in camping and, in the case of an emergency; I give my authorization to provide whatever emergency care is necessary for my child's safety. The camp is not responsible for accidents or injuries. I also give permission to the camp nurse to administer over-the-counter medications at his/her discretion.

Signature of Parent/Guardian (if under 18) \_\_\_\_\_ Date \_\_\_\_\_

Name of Insurance Carrier \_\_\_\_\_ Policy No. \_\_\_\_\_

This Portion is to be signed by Your Physician

- FYI
- Medications cannot be given without your physician's signature.
  - All medications must be in their original bottle.
  - For the dispensing of any prescription drugs, the camp must have:

Prescription Name(s) \_\_\_\_\_  
Prescription Number(s) \_\_\_\_\_  
Dosage Instructions \_\_\_\_\_  
Doctor's Signature \_\_\_\_\_

PLEASE COMPLETE THIS ENTIRE FORM AND RETURN IT WITH FEE TO YOUR CHURCH OFFICE or to CAMP.

Cathedral Pines and Easley Hot Springs are operated by the American Baptist Churches in Southern Idaho and is located in the Sawtooth National Forest.



HC 64 Box 8296  
Ketchum, Idaho  
83340

# Cathedral Pines 2020 Camps

## LIVING WATER

Summer  
Camp  
2020

## Child

FALL RALLY  
2020

And because you are sons, God has sent the Spirit of His Son into our hearts, crying, "Abba, Father!" So you are no longer a slave but a son, and if a son, then an heir through God. - Galatians 4:6-7

### Cathedral Pines Camp

HC 64 Box 8296  
Ketchum, Idaho 83340

Phone (208) 726-5007  
Fax (208) 726-0941  
E-mail: info@cathedralpines.org  
www.CathedralPines.org

# 2020 CAMPS

## KIDS CAMP

**June 14 - 18**

(Sun. 2 pm - Thurs. 12 Noon)  
Grades entering 4 - 6  
Registration Fee: \$200



## 2020 WINTER YOUTH CAMP

January 24 - 26, 2020  
Grades 6 - 12  
Registration Fee: \$80  
Registration Due Date: January 14, 2020



## Camper Registration

- ☐ Winter Retreat, grades 6-12, \$80
- ☐ Kids Camp, grades 4-6, \$200
- ☐ Jr. High Camp, grades 6-9, \$250
- ☐ Sr. High Camp, grades 9-12, \$250
- ☐ Fall Youth Rally, grades 6-12, \$80

FOR CAMP USE ONLY  
Deposit received \_\_\_\_\_  
Amt. \_\_\_\_\_ Ck # \_\_\_\_\_  
Balance Due \_\_\_\_\_  
Paid \_\_\_\_\_ Ck # \_\_\_\_\_



Now pay with Credit/Debit card  
Call us at 208-726-5007 for details.

## JUNIOR HIGH CAMP

**June 21 - 26**

(Sun. 2 pm - Fri. 12 Noon)  
Grades entering 6 - 9  
Registration Fee: \$250



## SENIOR HIGH CAMP

**June 28 - July 3**

(Sun. 2 pm - Fri. 12 Noon)  
Grades entering 9 - 12  
Registration Fee: \$250



## 2020 ACTS CAMPS

*Work in exchange for room and board!*

Youth can earn up to \$30 camp credit.



**Spring ACTS Camp**  
May 23 - 25

**Fall ACTS Camp**  
October 3 - 4



## FALL YOUTH RALLY

**October 16 - 18**

Grades 6 to 12  
Registration Fee: \$80  
Registration Deadline:  
October 5



## IDAHO ABWM GATHERING

"Sisters Seeking Wholeness"  
Luke 4:18-19

**June 5 - 7, 2020**

(Fri. Evening - Sun. 12 Noon)  
Registration Fee: \$122



## IDAHO ABWM FALL RETREAT

"Faith: Fan the Flame"  
2 Timothy 1:5-7

**September 20 - 22**

(Fri. 2 pm - Sun. 12 Noon)  
Registration Fee: \$83



## Multiple Family Member Discount Available!

Registration is due two weeks prior to individual camp dates. (A \$25 per camper late fee may apply)  
Summer Registration Fees include room and board, recreational activities including swimming; t-shirt, arts and craft, and study materials.

## SCHOLARSHIP OPPORTUNITIES

Your local church may have additional scholarship programs available.

Cathedral Pines desires that camping opportunities be made available to all students.  
Individuals in need of financial assistance may contact the Camp Office for scholarship applications.

For questions or more information  
email [info@cathedralpines.org](mailto:info@cathedralpines.org)  
or Call (208) 726-5007  
or visit [www.cathedralpines.org](http://www.cathedralpines.org)

Camper's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street Address / PO Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Entering Grade \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Male/Female \_\_\_\_\_

If possible, please cabin with (optional, not guaranteed) \_\_\_\_\_

T-Shirt for summer camps: Please circle your size: Child – S M L XL Adult – S M L XL

Parent/Guardian Name \_\_\_\_\_ Phone (H) \_\_\_\_\_ / (W) \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone (H) \_\_\_\_\_ / (W) \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone (H) \_\_\_\_\_ / (W) \_\_\_\_\_

Church Name \_\_\_\_\_ City \_\_\_\_\_

Campers: So that the camp may be an experience of Christian Community, I agree:

1. To abide by the health, safety, property, and behavioral rules of the camp.
2. To conduct myself in a way which will make possible the best moral camping experience for everyone at my camp.
3. To give *all* medications, over-the-counter (aspirin, Motrin, diet pills, etc.) and all prescriptions, to the attending nurse at the beginning of my camp.

Parent/Guardian:

1. Please **DO NOT USE** my child's picture in any Cathedral Pines promotional materials. Parent/Guardian initials \_\_\_\_\_.
2. I understand that, should my child violate any of the above, they may be sent home before the end of camp. If called, I will be responsible to arrange transportation home for this child.

Camper's Signature: \_\_\_\_\_

Parent or Guardian's Signature: \_\_\_\_\_

**Multiple campers from the same immediate family** qualify for a discount to summer youth camps only. The first child is the regular price. The second child is \$40 off the regular price. Subsequent children from the same family are \$60 off the regular price.

**Campers attending multiple camps:** 6th or 9th Grade campers opting to attend both weeks of camp will be offered a \$40 discount on the second week of camp. Any family discount will not apply to the second week.

Please turn your registration form and non-refundable deposit of \$25 into your church office at least two (2) weeks prior to summer camps and one (1) week prior to any weekend retreat. Registrations may also be sent to Cathedral Pines Baptist Camp.

The balance of the camp fee is due on the first day of camp or retreat. If you have not received your confirmation within seven (7) days prior to the camp for which you are registered, please contact the camp office to insure that you are registered ([info@cathedralpines.org](mailto:info@cathedralpines.org)).

Summer registration fees include room and board, recreational activities including swimming, t-shirt, arts and craft and study materials.

*No camper shall be denied his/her camping experience at Cathedral Pines due to an inability to pay. If financial assistance is needed please contact your local church to determine availability of scholarship funds, if assistance is not available through your local church, or if you are in a position to contribute to the Cathedral Pines Scholarship Fund, contact the Camp Manager, Rudy Bauder, at (208) 726-5007 or via email at [info@cathedralpines.org](mailto:info@cathedralpines.org).*

Please complete and *sign* the reverse side of this form.