

Frequently Asked Questions

Q: *When does camp begin?*

- A. All camps (except Primary): Sunday at 4:30 p.m.
Primary: Monday at 9:00 am
No supervision will be provided for children who arrive early. We are cleaning camp!

Q: *When does camp end?*

- A: Primary Camp - Wednesday at 10 a.m.
All other camps - Friday at 10:00 a.m.

Q: *Are campers served dinner after registration?*

- A: Yes!

Q: *What is a family discount?*

- A: If you have more than one child attending camp this summer, the first child is regular price, second is \$5 off, third is \$10 off, fourth or more is \$15 off.

Q: *How do I send a letter to someone at camp?*

- A: Note: mail takes about 5 days to arrive

Camper's Name
c/o Mountain Meadows Bible Camp
7100 Arrowhead Road
Shingletown, CA 96088

Q: *May I call my camper? May my camper call me?*

- A: **Only** in the event of an emergency; Director or Camp Nurse will initiate the call home for clear communication.

Mountain Meadows

Summer 2024 Word vs. World



"See what kind of love the Father has given us, that we should be called Children of God; and so we are."

ShastaChristianYouth.org

Summer Program Director
Matthew Warner (530) 604-0919

Registration Questions: Jared and Sabrina
(530) 737-7895

Summer Camp Schedule

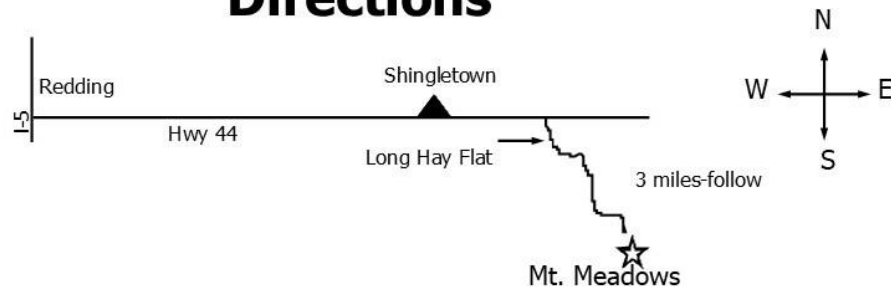
Registration for all camps (except Primary) begin Sunday at 4:30 p.m.
Primary Camp begins Monday at 9:00 a.m. & ends Wednesday at 10:00 a.m.



Primary	<i>For kids entering grades 1-3</i> <i>Registration begins Monday at 9:00 a.m.</i> <i>Camp ends Wednesday at 10:00 a.m.</i>	July 1– 3	\$100.00
Junior I	<i>For kids entering grades 4-6</i>	June 16 - 21	\$170.00
Junior II	<i>For kids entering grades 4-6</i>	June 23–28	\$170.00
Junior High 1	<i>For teens entering grades 7-8</i>	July 7-12	\$170.00
Junior High 2	<i>For teens entering grades 7-8</i>	July 14-19	\$170.00
High School	<i>For teens entering grades 9-12</i> <i>Focuses on spiritual growth.</i>	July 21-26	\$185.00

****Please drive slowly past neighbors on Long Hay Flat Road****

Directions



Registration Questions: Jared and Sabrina · (530) 737-7895

Program Director: Matthew Warner · (530) 604-0919

Cut on dotted line and Mail With Payment

Please do not write outside dotted line

Please do not write above this line. For office use only.

Camp Registration Form

Camp (circle one): Primary I Junior I Junior II Jr. High 1 Junior High 2 Highschool
Please check this box if entering senior year in high school

Camper Name Birthdate (mm/dd/yy)
Age Grade Entering Gender ONE Cabin Buddy Request (no guarantee)

Parent Name Email Address

Street Address City State Zip Code

Home Phone Work Phone Cell Phone

Home Church

Secondary Emergency Contact (if unable to reach parents):

Name Relationship Phone

PHOTO CONSENT: Mountain Meadows Bible Camp uses pictures from the week to make DVD's of slide shows and may use pictures in printed/web publications. Your registration constitutes permission for Mountain Meadows Bible Camp to use images for those purposes. A written statement must be on file if you do not give consent.

Authorization of Treatment

I certify that I am the parent/guardian of

I/We (parent/guardian) do hereby authorize Mountain Meadows Bible Camp as agents for the undersigned to administer my child's prescribed and over the counter medications as indicated by a physician and/or myself. I further consent to any x-ray examinations, anesthetic, medical or surgical diagnosis rendered under the general or special supervision of any physician and/or surgeon licensed under the provisions of the Medical Practice Act on the medical staff or licensed hospital. I understand that every effort will be made to contact me in the event of an emergency.

Signature of Parent/Guardian Date

Cut on dotted line and Mail With Payment

Please do not Write outside dotted line

Medical/Health History
Confidential

Personal Health and Accident Insurance	
Policy Number	
Personal Physician	
Physidan Phone Number	
Mt. Meadows accidental insurance is a secondary coverage. In the event of an accident, your insurance will be billed first.	

Please check YES or NO on the following

Able to Swim -----	YES	NO
Immunizations current -----	<input type="checkbox"/>	<input type="checkbox"/>
Date of last Tetanus Vaccine _____		
Any activity restrictions for medical reasons?*- ----	<input type="checkbox"/>	<input type="checkbox"/>
Allergies to food/medicine*- -----	<input type="checkbox"/>	<input type="checkbox"/>
Special Dietary Needs*- -----	<input type="checkbox"/>	<input type="checkbox"/>
Condition requiring medication*- -----	<input type="checkbox"/>	<input type="checkbox"/>

*If yes to these questions above, please include attachment with further explanation of needs.

Health History: *Circle those that apply*
 Diabetes Anaphylaxis Frequent Urination
 Asthma Iodine allergy Heart Problems
 Ear Infections Epilepsy/Seizures Other:

Occasionally, it is necessary to provide campers with over the counter medications when they are at camp. Please **circle** below to indicate whether you give permission for the listed medication to be administered by qualified camp staff. We will not administer any medication without this authorization.

Please circle YES or NO for each medication.

Allergies		Indigestion	
Y	N	Benadryl	Y N Tums
Y	N	Loratadine	Y N Pepto (>12 y.o. only)
Pain / Fever		Rash / Itching	
Y	N	Tylenol	Y N Cortisone cream
Y	N	Ibuprofen	Y N Caladryl lotion

ALL MEDICATIONS and PRESCRIPTIONS MUST:
 1. Be in the original container.
 2. Have a note with HOW, WHEN, and WHY to administer which is SIGNED by the legal guardian.

OFFICE USE ONLY
 Recent exposure to infections?
 Wellness check?
 Feeling sick?
 Medications?

Payment Details
Register Early to Guarantee Acceptance!

Unless you get a phone call from Shasta Christian Youth, your registration is confirmed.
Payment is required with your registration form!

Payment Worksheet

Camp Cost	\$
Snack Bar (optional) \$10 max (Primary camp \$5 max)	\$
T-Shirt (optional) \$15	\$
Hat (optional) \$15	\$
Total Amount Due**	\$
Family Discount	\$
Donation to camp to help keep camper fees low	\$
TOTAL ENCLOSED (\$50 Deposit Minimum)	\$
Balance Due Upon Arrival** - cash or check only -	\$

** **Important - If you have a Scholarship, it must be listed below and scholarship money must accompany this form**

Scholarship Source	
Scholarship Amount	\$

Payment Methods

- 1. Pre-registration**-Payment IN FULL (preferred) or \$50 non-refundable deposit with check or cash guarantees camper's placement.
- 2. At-camp registration**-Pay IN FULL with check or cash when you come to camp (no guarantee of acceptance! Call for availability!)
- 3. ONLINE registration** – starting May 1st, register AND pay in full online! There is a small fee charged for online payments. www.ShastaChristianYouth.org

Checks Payable To: Shasta Christian Youth, Inc.

Payment Address:
(Please send form and deposit to)
 Mountain Meadows Camp Registrar
 P.O. Box 494591
 Redding, CA 96049
www.ShastaChrstitianYouth.org