

CHVILLE PRESBYTERY

FOR HIGH CAMP

You Be My Neighbor?

Love the Lord your God with all your heart, and
with all your mind.' This is the first
commandment. And second is like it: 'You shall
love your neighbor as yourself.'"

Matthew 22:37-39 (NKJV)

July 18 - 23, 2021

Crystal Springs Camp

Currently in 6th, 7th and 8th Grades

Fees:

June 25th: \$160 (Canteen Not Included)

June 25th: \$180 (Canteen Not Included)

**Presbyterial Camp Registration Form sent to Mark at
by June 25th, or follow your church's guidelines.
If you do not have the canteen, camper will need \$20 for the week of camp for
the canteen.**

Worship at Wenhaven C.P. Church, Sunday, July 18, 2:00 P.M.

Worship at Wenhaven C.P. Church, Friday, July 23, 1:30 P.M.

Crystal Springs Camp

Packing Check List

Things to Bring:

- Bible (Essential item for church camp)
- Plenty of Clothes in Good Taste
- Extra Shoes/Sandals (Footwear is required when outside of cabins)
- Sheets, Blankets and/or Sleeping Bag
- Pillow
- 2 Bath Towels and Wash Clothes (Thin, cheap towels will dry faster in the summer humidity)
- Toilet Articles (Soap, Shampoo, Toothbrush, Toothpaste, etc.) (Heavy deodorants and perfumes are not suggested as they will attract bugs)
- Swimsuit (All females must wear one piece bathing suits)
- Beach Towel
- Jacket or Wind Breaker (Believe it or not it can get chilly at camp)
- Fan (It has also been known to get hot at camp, sometimes very hot)
- Sunscreen and Bug Spray
- Pencil/Pen
- Notepad
- Ball Glove, Ball, Football, Frisbee, etc.
- Fishing Equipment (Only if you like to fish)
- Envelopes and stamps (If you want to write home)
- Camera (Optional, For those Kodak moments)
- Musical Instrument (If you want to perform on Talent Night)
- Good Attitude

THINGS NOT TO BRING:

Inappropriate clothing, inappropriate music (no music with foul language or suggestive lyrics), fireworks, lighters, weapons of any kind (may have small pocket knife with fishing tackle) Electronic Devices (Cell Phones, iPads, Kindles, iPods, etc) are not suggested to be brought. These are easily damaged and if brought must be left in cabins. The Camp cannot be held liable for broken or damaged Cell Phones and other electronic devices.

Dear Junior High Friends and Family,

The 2021 camping season is upon us! Since we didn't have camp last year, we are super looking forward to seeing campers this year. Hopefully, everyone will remain healthy and we will have a fantastic week together. Junior High Camp is for kids having completed 6th-8th grade will happen **JULY 18-23, 2021 at Camp Crystal Springs.**

Since we planned our theme and the curriculum went unused last year, we will use it this year, so our theme remains **Won't You Be My Neighbor?** Our main scripture verse is taken from Matthew 22, when Jesus was asked which was the greatest commandment. He replied verses 37-39: 39 He said to him, "You shall love the Lord your God with all your heart, and with all your soul, and with all your mind." 38 This is the greatest and first commandment. 39 **And a second is like it: 'You shall love your neighbor as yourself.'** We want to share the love of Jesus Christ with our campers by showing them how to love their neighbors, friends, family, and themselves. Tyler Spradling wrote the lessons based upon the teachings of Fred Rogers, so bring your cardigans and Vans and join us this summer!

Enclosed is a list of things to bring (or not bring!) to camp, along with guidelines for appropriate clothing for boys and girls. There are two registration forms enclosed (one for presbytery and a medical form for the camp), along with a permission form for over-the-counter medications and a COVID Waiver form. It is very important that all forms are read and signed in the designated areas by the campers' parents/guardians. We want to make sure our campers have a wonderful camp experience, and that means making sure we have all the information needed to ensure this happens. **Send forms to Mark Rolman, 102 Charles Court, Dickson, TN 37055.** Check with your church before sending in your forms, as some churches prefer to send their forms in together and some prefer the camper to send in the forms. **We will accept forms via mail until June 30th.** After that date, please bring the forms with you to registration.

The cost of camp is \$180 for the week, which includes food and lodging, but does not include canteen. **Register before June 30th, and the cost is \$160!** Campers will need to bring about \$20 with them for additional snacks through the canteen, which will be made available to them 3 times each day. Make checks payable to **Nashville Presbyterial Camps.** **Registration begins at 2:00 pm July 18 at Brenthaven Church, 516 Franklin Road, Brentwood, TN 37027. Departure will occur at 3:00 pm from Brenthaven. We will return to Brenthaven on Friday, July 23 at approximately 1:30 pm.**

Although we discourage campers from bringing electronic devices to camp, we know that campers use them for flashlights, alarms, cameras, etc. We want them to focus on their camp experience personally, not electronically. Please know and share with your camper that there is **NO WIFI** at Crystal Springs, so any time they use their phones, they can incur data usage. We are going to assume that campers who bring their own devices are old enough to care for them properly; therefore, we will assume no responsibilities if the devices are damaged in anyway while at camp.

If you have any questions, please feel free to contact our camp directors, Mark Rolman at (615)979-4313, Melissa "Mills" Wilson at (615)761-4668, or Brittany Stevens at (615)719-3362.

We are looking forward to seeing our camp friends on July 18th at Brenthaven!

Blessings,

Mark, Mills, and Brittany

RULES OF CAMP

NASHVILLE PRESBYTERY JUNIOR AND JUNIOR HIGH CHURCH CAMP

1. When the bell rings go to your appointed places, do not wander around camp or stay in cabins. Activity schedules will be placed around camp if you do not remember what the next activity is.
2. Participation in all camp activities is highly encouraged. Participation and behavior will determine length of the nightly and other activities.
3. No camper is to walk around the lake after dark, without a counselor.
4. No camper is to leave the main camp area after vespers, this means spring, chapel, and ballfield, without a counselor.
5. Campers will stay at evening activities, unless their cabin counselor or evening activities director gives permission.
6. Everyone is to attend all meals and stay in the dining hall until released by director; announcements will be made after meals.
7. **NO sneaking out of cabins will be tolerated;** campers caught will be discipline by directors. Sneaking out is dangerous; this could result in your being sent home. Campers are to stay in their cabins after lights out, except to notify counselor(s) or director(s) that someone is sick or hurt. This also applies to being out before daybreak, if a camper wants to go fishing early they must let their counselor know and wait until first light.
8. No campers will be in cabin of the opposite gender during camp.
9. Campers are not to be in cabins that they are not sleeping in without permission from a counselor of the cabin and accompanied by a camper that is staying in the cabin.
10. Cabins will be cleaned and inspected after breakfast, intentionally trashing a cabin or not cleaning up cabin will call for cleaning details during free time or swim time.
11. When a counselor gives peace sign, group should become quiet. Whenever a counselor or fellow camper is speaking to group, show respect by staying quiet and listening, you may learn something. This is extremely important during vespers and quiet time; this is a time for worship and reflection. Be courteous to others. During quiet time stay in vespers' area, areas around the pavilion, or in front and side areas of the lake, do not go to cabins, around the lake, or out of immediate area.
12. Anyone hurt or not feeling good should report it to the camp medical counselor, another counselor and/or director as soon as possible.
13. Take frequent rest and water breaks; you will dehydrate quickly in the July heat. Eat candies in moderation before recreation time, sugar mixed with heat can cause cramps, sick at your stomach feeling or even make you pass out.
14. Fighting or verbal abuse of another camper or counselor **will not** be tolerated.
15. Campers are to respect and obey counselors and directors, without them this camp would not be possible.
16. Swimsuits are to be worn only during swim time. Also, swimsuits should be appropriate for the co-ed Christian camp. All female campers and counselors must wear one piece bathing suits.
17. Shoes or sandals are to be worn at all times, even when going to pool or bathhouse.
18. Clothing should be appropriate for Christian Youth Camp, use your good judgement. You be asked to change if you wear something inappropriate.
19. Please leave the camp grounds in better shape then you found them; throw all trash away in trash barrels. If camp becomes extremely messy, free time will be used to clean campgrounds.
20. If you have any complaints about camp bring it to the attention of a counselor and it will be discussed at a staff meeting.
21. No camper or counselor will use any form of tobacco during the week.
22. Fireworks are strictly forbidden.
23. Campers are not to be in the main part of the mess hall except during meal times or other group activities.
24. A certified lifeguard must be on the banks of the lake at all times when campers are out in paddleboats. All persons anytime they are out on the lake will wear life jackets.
25. This is a closed camp, all uninvited visitors that could disturb the mood of camp, interfere with jobs of counselor(s) or directors, or keep the youth from wanting to participate in camp activities, will be asked to leave by the directors. Campers are not to ask friends and family to come and visit during the week. If you would like to visit the camp during the week, please contact directors before camp for appropriate times to visit.
26. Church camp is a place to have fun, revive friendships, and make new friends, but it also has a serious side. To bring us all closer to God and to examine your relationship with Jesus.
27. Following these rules will make yours and follow camper's camping experience a better one. Becoming involved and participating in all you can, will give you memories and friendships that will last a life time. **Let's go out and have one great week and great Christian camping experience!!!!**

NASHVILLE PRESBYTERY JUNIOR / JUNIOR HIGH CAMP

REGISTRATION FORM

Please Print Plainly, Use Blue Or Black Ink, And Be Sure To Fill In The Whole Form

CAMPER INFORMATION:

NAME (Last Name, First Name): _____ AGE: _____ GENDER: _____

ADDRESS: _____ DATE OF BIRTH: _____ GRADE THIS FALL: _____

CITY: _____ STATE: _____ ZIP: _____ HOME PHONE NUMBER: (____) _____

YOUTH'S E-MAIL ADDRESS (this e-mail address will be included on camp address list): _____

PARENT(s) NAME: _____ PHONE: Work or Cell: (____) _____

PARENT(s) ADDRESS (if not the same): _____

PARENT(s) E-MAIL ADDRESS (this address will not be included on camp address list): _____

NAME OF CHURCH (Or Church your youth is attending with): _____

PASTOR'S NAME: _____ PHONE NUMBER: (____) _____

ALL CAMPERS MUST SIGN THE FOLLOWING COVENANT (read camp rules sheet before signing):

I, _____, agree to abide by all camp rules and requirements, **to actively participate in all camp activities: Bible studies, Vespers, Quiet Time, recreation/crafts, meals, lights out, etc. I understand that breaking this covenant could result in discipline action by the directors or in my being sent home.**

ALL PARENTS MUST SIGN FOR THE FOLLOWING ITEMS:

BUS/VAN TRANSPORTATION: I hereby grant permission for (youth's name) _____ to ride a church bus/van to Crystal Springs Camp in Kelso, TN and return to the Brenthaven. If the youth is injured on bus due to his or her own negligence, Nashville Presbytery and the churches that own the buses/vans and their drivers are not responsible.

YOUTH PICK-UP: I agree that if my youth breaks the above covenant and is by the decision of the directors to be sent home, that I will come to Crystal Springs Camp and pick up my youth, **immediately.**

PARENT OR GUARDIAN'S SIGNATURE: _____

Make sure the Presbyterian Registration form (1 page), Health/Medical form (3 pages), Administer Over-the-Medications form (1 page), and COVID-19 Liability Waiver (1 page) are completely filled out and signed. All forms are required for youth to attend camp. ALSO, MUST PROVIDE A COPY OF THE FRONT AND BACK OF INSURANCE CARD.

If your youth has any other special medical conditions or needs, please call the director, Mark Rolman, (615) 979-4313.

MAIL REGISTRATION FORMS and PAYMENTS TO:

NASHVILLE PRESBYTERIAL CAMP
MARK ROLMAN
102 CHARLES CT.
DICKSON, TN 37055

ANY QUESTIONS CALL:

Junior Camp	Junior High Camp
Jimmy Sharpe (615) 834-2367	Mark Rolman (615) 979-4313
Paula Winn (423) 539-4780	Melissa Wilson (615) 761-4668
Kathryn Gabell (931) 980-7940	Brittany Stevens (615) 719-3362
Gabe Sharpe (615) 509-1952	

MAKE CHECKS PAYABLE TO: NASHVILLE PRESBYTERIAL CAMPS

***** FOR THOSE CAMPERS ATTENDING JUNIOR CAMP ONLY *****

If your camper has pre-registered (mailed forms by June 25th) he/she may receive a Junior Camp Photo Memory book for only \$10.00. After the deadline or on the day of the price will be \$20.00. Money may be paid now or on the day of camp. Payments need to be on a separate check from Camp fee, but still payable to Nashville Presbyterial Camps.

Does your Junior Camper wish to receive a photo memory book of their week at camp? _____ Yes or _____ No

Crystal Springs Camp

Registration and Health Form

21 Crystal Springs Camp Road
 Kelso, TN 37348
 931-937-8621
 www.crystalspringscamp.org

Rec Group # _____

Study Group # _____

Cabin # _____

Name _____

Camp or Group Name _____

Date of Form _____

Camper Name _____ Date of Birth _____ Age _____ Gender _____

Home Address _____ city state zip

Phone _____ Social Security # _____ EMAIL _____

Church Name _____

Pastor _____ Phone _____

Parent/Guardian Name _____

Address (if not same) _____ city state zip

Work Address _____ city state zip

Phone#: Home _____ Work _____ Other _____

Alternate Emergency Contact _____ Phone _____

Address _____ city state zip

Insurance Information

Is the Camper covered by a health insurance policy? _____ Health Insurance Company _____

Policy # _____ Group # _____

Please Attach a copy of the front and back of health card to this Form.

THE CAMPER COVENANT- Must be signed to attend camp

As a camper at this camp, I agree to abide by all camp rules and requirements, and to actively participate in all camp activities. I realize that I am financially responsible for any camp property that is destroyed or defaced. I understand that breaking this covenant could result in discipline action by the directors or in my being sent home.

Camper Signature _____ Date _____

PARENTS OR GUARDIANS AUTHORIZATION- Must be signed in order for camper to attend.

I give permission for the camper to participate in all camp activities. I do acknowledge that the health history on this form is complete and correct to my knowledge. I give permission for the camp to provide the necessary medical treatment needed for the camper including: routine health care, administering medications, seeking emergency treatment, including ordering x-rays or routine tests.

I give permission for the camper to ride on transportation provided by the sponsors of this camp (Group renting camp facilities). I agree that I will not hold the Camp, Group, owners of vehicles or drivers responsible for any injury suffered by the camper due to his or her own negligence.

In case of medical emergency, I understand that every possible effort will be made to contact parents or guardian. In the event I cannot be reached, I give permission to the physician selected by the camp director to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for the above named camper.

Parent or Guardian Signature _____ Date _____

PICTURE AUTHORIZATION

I give permission for my youth's picture to be taken, and it may also be used on the Crystal Springs Camp Web site and to possibly be used in future camp promotional material

Parent or Guardian Signature _____ Date _____

HEALTH HISTORY

MEDICATIONS BEING TAKEN

Please list all medications taken on a routine basis including over the counter and non prescription drugs.

IMPORTANT: Bring enough medication to last the duration of camp. Please keep it in the original packaging or bottle that identifies the Physician prescribing the drug, the name of medication, the dosage, and frequency of administration.

Check one of the boxes

This camper is currently taking no medications on a routine basis.

This camper currently takes the following medication

Name of drug _____ Dosage _____ # times taken each day _____

Medical reason for taking the drug _____

Name of drug _____ Dosage _____ # times taken each day _____

Medical reason for taking the drug _____

Name of drug _____ Dosage _____ # times taken each day _____

Medical reason for taking the drug _____

ALLERGIES(please list all that are known)

Describe reaction and treatment normally taken.

Medication

Food

Other

RESTRICTIONS

Please list any dietary restrictions this camper has: _____

Please list any Physical restrictions (things the camper cannot do) _____

Rate the camper's ability to Swim: ___Excellent ___ Fair ___ Poor ___ Cannot swim

GENERAL QUESTIONS

Which of the following has the camper had:

___Measles ___ Chicken Pox ___ German Measles ___ Mumps ___ Hepatitis A ___ Hepatitis B ___ Hepatitis C

Give the most recent dates of the following immunizations:

DTP _____ Tetanus _____ Polio _____
Mumps/Measles/Rubella _____ Hepatitis _____ TD-Tetanus/Diphtheria _____
Chicken Pox _____

PLEASE ANSWER THE FOLLOWING QUESTIONS YES OR NO,

DOES OR HAS THE CAMPER:		YES	NO			YES	NO
1	Had a recent injury illness or infectious disease?	ف	ف	15	Had frequent headaches?	ف	ف
2	Have a chronic or recurring illness or condition?	ف	ف	16	Had surgery?	ف	ف
3	Been hospitalized	ف	ف	17	Had problems with body joints?	ف	ف
4	Been diagnosed with heart murmur?	ف	ف	18	Have an orthodontic appliance that will be brought to camp?	ف	ف
5	Had back problems?	ف	ف	19	Had a eating disorder?	ف	ف
6	Had high blood pressure?	ف	ف	20	Have a history of bed-wetting?	ف	ف
7	Had chest pain during or after exercise?	ف	ف	21	If female, have an abnormal menstrual history?	ف	ف
8	Had seizures?	ف	ف	22	Have problems sleepwalking?	ف	ف
9	Been dizzy during or after exercise?	ف	ف	23	Had problems with diarrhea or constipation	ف	ف
10	Passed out during or after exercise?	ف	ف	24	Had mononucleosis in last 12 months	ف	ف
11	Had frequent Ear infections	ف	ف	25	Have asthma?	ف	ف
12	Wears glasses, contacts or protective eye wear?	ف	ف	26	Have diabetes?	ف	ف
13	Been knocked unconscious?	ف	ف	27	Have any Skin problems?	ف	ف
14	Had a head injury?	ف	ف	28	Had emotional difficulties that required professional help?	ف	ف

Please explain the yes answers to the above questions noting the question number: _____

Name of Family Physician: _____

Address: _____

Phone : _____

Any other information the directors of the camp should know about the physical, emotional, or mental health about the camper: _____

PHYSICAL NEEDED ONLY IF REQUIRED BY INDIVIDUAL CAMP GROUP

PHYSICAL APPROVAL BY A PHYSICIAN OR LICENSED MEDICAL PERSONNEL

Date of Examination _____ (MUST NOT BE MORE THAN 24 MONTHS PRIOR TO CAMP DATE)

In My opinion, _____, IS _____ or IS NOT _____ able to participate in an active camp program.

Name of Physician or Licensed Medical Personnel (Print) _____

Address _____

Title _____ Phone _____ Date _____

Signature _____

Permission to Administer Over-the-Counter Medications

I give permission for my child, _____,
to receive over-the-counter (OTC) medications, if needed. (i.e., Tylenol,
Ibuprofen, Benadryl, antacids, etc.)

My child may receive OTC meds **EXCEPT** for the following
medication(s): _____.

Parent's Signature: _____

Date: _____

Additional Information:

Tetanus vaccination received on _____.

My child, in the last 2 weeks, has been or is now being treated for:
____N/A ____head lice ____body lice ____a contagious condition
Name of condition (if applicable): _____

COVID-19 LIABILITY WAIVER

READ CAREFULLY - THIS AFFECTS YOUR LEGAL RIGHTS

In exchange for use of the property, facilities, and services of Crystal Springs Camp, Inc, of 21 Crystal Springs Camp Road, Kelso, Tennessee, 37348, I, _____, residing at _____, agree for myself and (if applicable) for the members of my family, to the following:

1. AGREEMENT TO FOLLOW DIRECTIONS. I agree to observe and obey all posted rules and warnings regarding COVID-19, and further agree to follow any oral instructions or directions given by Crystal Springs Camp, Inc, or the employees, representatives or agents of Crystal Springs Camp, Inc.

2. ASSUMPTION OF THE RISKS AND RELEASE. I recognize that there are certain inherent risks associated with the above described activity regarding COVID-19, acknowledge the contagious nature of COVID-19 and understand that CDC and public health authorities recommend the practice of social distancing, and I assume full responsibility for personal injury to myself and (if applicable) my family members, and further release and discharge Crystal Springs Camp, Inc for injury, loss or damage arising out of my or my family's use of or presence upon the facilities of Crystal Springs Camp, Inc, whether caused by the fault of myself, my family, Crystal Springs Camp, Inc or other third parties.

I acknowledge that Crystal Springs Camp, Inc has followed all local and state requirements regarding the coronavirus pandemic to reduce the spread of COVID-19. I acknowledge that Crystal Springs Camp, Inc cannot guarantee that I will not become infected with COVID-19.

3. INDEMNIFICATION. I agree to indemnify and defend Crystal Springs Camp, Inc against all claims, causes of action, damages, judgments, costs or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my family's use of or presence upon the facilities of Crystal Springs Camp, Inc.

4. APPLICABLE LAW. Any legal or equitable claim that may arise from participation in the above shall be resolved under Tennessee law.

5. NO DURESS. I agree and acknowledge that I am under no pressure or duress to sign this Agreement and that I have been given a reasonable opportunity to review it before signing. I further agree and acknowledge that I am free to have my own legal counsel review this Agreement if I so desire. I further agree and acknowledge that Crystal Springs Camp, Inc has offered to refund any fees I have paid to use its facilities if I choose not to sign this Agreement.

6. ARM'S LENGTH AGREEMENT. This Agreement and each of its terms are the product of

an arm's length negotiation between the Parties. In the event any ambiguity is found to exist in the interpretation of this Agreement, or any of its provisions, the Parties, and each of them, explicitly reject the application of any legal or equitable rule of interpretation which would lead to a construction either "for" or "against" a particular party based upon their status as the drafter of a specific term, language, or provision giving rise to such ambiguity.

7. ENFORCEABILITY. The invalidity or unenforceability of any provision of this Agreement, whether standing alone or as applied to a particular occurrence or circumstance, shall not affect the validity or enforceability of any other provision of this Agreement or of any other applications of such provision, as the case may be, and such invalid or unenforceable provision shall be deemed not to be a part of this Agreement.

I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I FURTHER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS.

By: _____

Date: _____