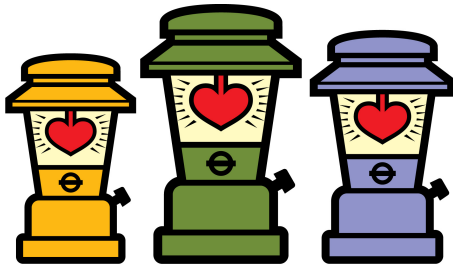


INDEPENDENT BAPTIST CAMP

JUNE 28 — JULY 2, 2021



Family Camp

Sr. Camp Evangelist

Bro. Rudy Rios

Pastor, Temple
Texas City, TX

Jr. Camp Evangelist

Bro. Raleigh Campbell

Pastor, Mosaic Baptist Church
Flower Mound, TX

What to Bring

- ☐ Bible
- ☐ Notebook
- ☐ Sleeping bag/linens/pillow
- ☐ Towels & Washcloths
- ☐ Personal hygiene items
 - ☐ Soap
 - ☐ Deodorant
 - ☐ Toothpaste
 - ☐ Toothbrush
 - ☐ Shampoo
 - ☐ Etc.
- ☐ Sun Block Lotion
- ☐ Sports Equipment
- ☐ Swimsuit
- ☐ Camera
- ☐ Flashlight
- ☐ Spending Money



Camp Cost

There will be a **\$20 deposit due before June 1.**
After June 1st registrations will be received on a space available basis only & with a \$10 late fee attached.

Dorm Fee: \$200

Motel Fee: \$250

Children Under 2 - Free

Children 2-6 ½ Price

Ages 7 & up Full Price

Meals for Guests:

Will be payed at the Camp

Camp Fees include all meals, lodging. All activities are included except for skeet shooting and paintball.

About the Camp Site

Timberline is located in Lindale, TX just 30 minutes east of Canton.

All guests will need to pay a day use fee and register with the office upon arrival.

The address is:

15369 FM 849
Lindale, TX 75771

Office - (903) 882-3183

Directions to camp:

From Interstate 20, take FM 849 (Exit #552) north 2 miles to the Timberline sign on your left. This exit is 80 miles east of Dallas and 95 miles west of Shreveport, LA.

Turn in your Forms
and Your \$20
Deposit by
June 1



Dress Code

- ☼ Casual dress is encouraged, but neatness and modesty are demanded.
- ☼ Please, do not bring any article of clothing that has words, graphics, or logos that might be offensive to others, or distract from the spirit of camp.
- ☼ Cover-ups **must** be worn by boys and girls going to and from the swimming pool.
- ☼ Shoes must be worn outside the dorm.

Dress Code for Girls

- ☼ Knee length shorts **ONLY!**
- ☼ No Yoga or Workout Pants
- ☼ No Mini-skirts
- ☼ No Mid-Drift Shirts or Crop tops
- ☼ No Spaghetti straps Unless they are covered or are covering another shirt (no exposed skin)
- ☼ No Racer back tank top shirts
- ☼ 1 Piece Swimming Suit - 2 Pieces
MUST wear a T-Shirt unless the 2 pieces touch.

Dress Code for Boys

- ☼ No sleeveless shirts or tank tops
- ☼ Knee length shorts **ONLY!**



Camp Rules

- 1. Sponsors** - There must be one responsible adult for every 10 campers from each church.
- 2. Medical Release** - Each camper **must have a medical release** filled out, signed by a parent, and turned in at registration. These forms are required by Timberline Camp. There is no insurance carried by the camp in case of accident or sickness. If a camper has to be taken to the doctor or hospital for sickness, the necessary financial arrangements need to be made by the individual or a sponsor from the church that brought the camper.

3. Swimming - No mixed swimming is allowed. Timberline staff will oversee all swimming times and all rules will be enforced for safety's sake. Swimmers boys and girls must be **fully clothed** going to and from the pool area.

4. Use of Autos - Other than loading and unloading on Monday and Friday, all vehicles must remain in the parking lot, or specified parking areas adjacent to the dorms.

5. Out of Bounds - Out of bounds areas will be announced in the camper meeting on Monday at the beginning of Camp. Please, stay within the specified areas and confines of the camp.

6. Use of Buildings - All buildings must be left clean. Do not deface nor mark on the walls. The camp manager will assess any damage done to the building and the church bringing the camper will be charged for damages done to furniture, windows, etc.

7. Cafeteria - No food is to be taken from the cafeteria. Please take plates, cups, and silverware to the designated clean-up area when you are finished eating. Please, to not go into the kitchen area. **DO NOT LITTER!**

8. Do NOT Bring - Firearms, fireworks, water pistols, shaving cream, balloons, alcoholic beverages, drugs, tobacco, Skateboards, media devices - Tablets or Computers.

9. Campers are NOT to have Cell phones at the Camp! (NO Exceptions)

Each church is to take up these from the campers upon their arrival at the camp. Campers may find their Pastor/Youth Leader and may use the phone in their presence to phone home only.

10. Attendance at Services and the appropriate age class is required for all campers. Lessons and Sermons have been specifically prepared for your age bracket



TIMBERLINE BAPTIST CAMP AND CONFERENCE CENTER, INC.

Name of Organization:

15363 FM 849, Lindale, Texas 75771-2410

Phone: 903-882-3183

Fax: 903-882-3184

Date of Activity:

June 28-July 2, 2021

Agreement To Participate Assumption of Risk and Release

RELEASE MUST BE SIGNED IN INK

Name of Participant:					Date of Birth:			Age:			
Address:											
City:				State:			Zip:			Phone Number:	
Persons to be contacted in case of emergency:											
Name:					Relationship:			Phone Number:			
Name:					Relationship:			Phone Number:			
Family Physician:					Phone:						
Insurance Company:					ID Number:			Group Number:			
Insured's Name:					Insured's SS#						

HEALTH HISTORY (Circle appropriate answer and describe any YES answers)

Please Describe

- | | |
|--|------------|
| 1. Have you had or do you have any heart problems? | NO.....YES |
| 2. Do you frequently suffer from pains in your chest? | NO.....YES |
| 3. Do you often feel faint or have spells of severe dizziness? | NO.....YES |
| 4. Has a doctor ever told you that you have high blood pressure? | NO.....YES |
| 5. Do you have arthritis, joint or back problems that might be aggravated by exercise? | NO.....YES |
| 6. Have you had any operations or serious injuries? Please give dates. | NO.....YES |
| 7. Do you have any disabilities or chronic recurring illness? | NO.....YES |
| 8. Are there any activities to be limited or discouraged by physician's advice? | NO.....YES |
| 9. Are you allergic to any medicines, insects or pollen? If yes, please list below | NO.....YES |
| 10. Do you have epilepsy? | NO.....YES |
| 11. Do you have diabetes? | NO.....YES |
| 12. Do you have any prescribed meal plan or dietary restrictions? | NO.....YES |
| 13. Last date of Tetanus/Diphtheria | |
| 14. What medical conditions are you currently being treated for: | |
| 15. List all medication you are currently taking: | |
| 16. Please give a statement of your current health (list all allergies): | |

The proposed Recreational Activities, including but not limited to: Challenge Course Activities, Paintball, or Horseback Riding, provided by Timberline require participation in physical exercises which are, by their nature, demanding. Many of the activities will challenge you and cause surges in blood pressure and pulse rates. It is imperative that you are free of any heart related or other diseases. Therefore, all participants must be free of medical or physical conditions which might create undue risks to themselves or any others who depend on them. Good physical condition will increase your enjoyment of the outdoor activities. If there is any doubt about your ability to safely participate in this experience, you should have a physical examination.

I am aware that during my participation in recreation at Timberline upon my request certain risks and danger may occur. These include, but are not limited to, the hazards of being in a wilderness area, the forces of nature, and other reasons concerning this special environment. I have and do hereby assume all risks and will hold staff, officers, and trustees harmless from any and all liability, actions, cause of action, debts, claims and demands of every kind and nature whatsoever which I now have or which may arise from or in connection with my participation in any activities arranged for me by Timberline and its staff. The terms hereof shall serve as a **Release and Assumption of Risk** for my heirs, executors, and administrators and for all members of my family.

This form gives Timberline permission to take my child's picture, individually or in a group, and publish it for promotional purposes only.

I **DO NOT** give permission to take pictures. _____ (Initials of Participant/Parent or Guardian)

Timberline reserves the right to not allow any individual and/or group which presents itself as a liability risk to participate in this program. This is at the sole discretion of the Timberline staff.

In case of accident or illness Timberline will attempt to provide first aid and arrange transportation to medical services, if needed. Timberline does have limited secondary insurance.

Assumption Of Risk And Release Form must be completely filled out and signed by the participant and by parent or legal guardian (for children under 18). These forms must be given to Timberline staff upon arrival to Timberline. Failure to circle "EXCLUDING" gives consent to participate in these activities. The health history above is correct, so far as I know, and I believe that my health is satisfactory to participate in all scheduled activities, EXCLUDING the Challenge Course activities EXCLUDING Rappelling and/or Rockwall

EXCLUDING Paintball

EXCLUDING Horseback Riding.

I, _____, the parent or guardian of _____, my child, authorize (church) _____'s physician, nurse, or authorized personnel to examine, treat, or administer medications for any illness or injury to my child as deemed necessary. In the event of an emergency and if I cannot be reached by telephone, I authorize such persons to obtain any medical care (including hospitalization, injection, anesthesia, and surgery) from a licensed, certified, or authorized health care provider for my child as deemed necessary. I accept sole responsibility for the payment of any medical care. I hereby release, indemnify and hold harmless (church) _____, and Timberline Baptist Camp, its agents and employees, from and against any and all claims, liabilities, or negligence of any such health care provider or of (church) _____ and Timberline Baptist Camp, its agents and employees.

Date: _____ Signature of Participant: _____

Date: _____ Signature of Parent/Guardian (if Participant is under 18 years of age): _____