

# Northern CA Youth Camp

A Ministry of the West Coast District – Church of God (Seventh Day)



Senior Campers: 10th Annual Bible Tournament on the Book of Joshua

## July 15 - July 21, 2024

"Capital Mountain" Christian Camp

2150 East Weimar Cross Road, Weimar, CA 95736

Registration Fee: \$345

Register by Monday, May 13th, 2023 and receive a \$50 discount

Junior Camp is Ages 8-12 - Senior Camp is Ages 13-18

(The age of the camper on the first day of camp will determine if they are a Junior or Senior)



### WHAT TO BRING?

- Bible
- Towel
- Deodorant
- Washcloth
- Sweatshirt
- Swimsuit (modest one piece or tankini)
- Pillow
- Flashlight
- Chap Stick
- Sun Screen
- Sun Hat
- Sleeping Bag
- Toothbrush
- Bug Repellant
- Water Bottle
- Soap

### WHAT NOT TO BRING?

- Cell Phones
- Airpods
- Lighters
- Laptops
- Valuables
- Anything questionable? Do not bring it!
- I-Pads
- Drugs
- Tobacco
- Alcohol
- Glass
- Media Devices
- Headphones
- Knives
- Fireworks
- Cannabis

<b>Executive Director:</b>	Irene Sotelo	(Senior/Junior Camp)	<b>Phone:</b>	(559) 333-0511
<b>Other Directors:</b>	Isabel Hernandez	(Junior Camp)	<b>Phone:</b>	(559) 789-5833
	Levi Van Fossen	(Senior Camp)	<b>Phone:</b>	(559) 731-5578
	Isaiah Sotelo	(Registration)	<b>Phone:</b>	(559) 722-0339
	Wendy Gomez	(Camp Nurse)	<b>Phone:</b>	(916) 952-5099
	Jose Hernandez	(Camp Pastor)	<b>Phone:</b>	(702) 349-8502

**CAMPERS MUST ATTEND THE WHOLE WEEK. NO PARTIAL-WEEK ATTENDEES!**

Check In: Monday, July 15, 2024 2:30 PM

PLEASE DO NOT COME EARLY!

Check Out: Sunday, July 21, 2024

**10:00 AM**

PLEASE PICK UP YOUR CAMPER(S) ON TIME!

### Registration Deadlines and Submission Instructions

Early Registration closes on May 13th 2024

Late Registration closes on July 1st 2024

*(No registrations will be accepted after this date)*

For more information, Email:

[Cog7ncyc@gmail.com](mailto:Cog7ncyc@gmail.com)

Or visit the camp website @

[www.visaliacog7.org/youthcamp](http://www.visaliacog7.org/youthcamp)

# COG7 Northern California Youth Camp Registration Form

## Camper Information

Legal Name: \_\_\_\_\_  
Preferred Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_  
T-Shirt Size: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Church: \_\_\_\_\_ Baptized: \_\_\_\_\_  
Swimming Ability: (Circle One) \_\_\_\_\_ Beginner / Novice / Advanced

## Medical History

Medical Conditions: \_\_\_\_\_  
\_\_\_\_\_  
Activity Restrictions: \_\_\_\_\_  
\_\_\_\_\_

## Allergies

Medications: \_\_\_\_\_  
Foods: \_\_\_\_\_  
Other: \_\_\_\_\_

## Daily Medications Needed While at Camp

Medication	Dosage	Times To Give
_____	_____	_____
_____	_____	_____
_____	_____	_____

\*All medications must be in original labeled containers

The following **NON-PRESCRIPTION** medications may be given as needed by the camp medical provider to manage illness or injury:

- Pain or fever reducer (Tylenol, Advil, Motrin, ibuprofen)
- Upset stomach (tums, pepto bismol, imodium, maalox)
- Cough Syrup (guaifenesin, dexamorphan)
- Decongestant (phenylephrine)
- Allergy medication (Benadryl, Claritin)
- Triple antibiotic ointment
- Hydrocortisone cream

If you would **NOT** like your child to receive any of these medications please specify: \_\_\_\_\_  
\_\_\_\_\_

Any mental health concerns that would help us to make your child feel more comfortable at camp? \_\_\_\_\_  
\_\_\_\_\_

## Parent Primary Guardian Information

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Zip Code: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
1st Phone #: \_\_\_\_\_  
2nd Phone #: \_\_\_\_\_

## Secondary Emergency Contact Information

Name: \_\_\_\_\_  
Relationship To Camper: \_\_\_\_\_  
1st Phone #: \_\_\_\_\_  
2nd Phone #: \_\_\_\_\_

## Medical Insurance

Insurance Company: \_\_\_\_\_  
Group/Number: \_\_\_\_\_  
Primary Care Provider: \_\_\_\_\_  
Subscriber Name: \_\_\_\_\_  
Insurance Company phone #: \_\_\_\_\_

## Authorization for treatment of a Minor:

Campers Full Legal Name: \_\_\_\_\_

(I) (We), the undersigned, parent(s) or legal guardian of the individual named above, a minor, do hereby authorize Church of God (Seventh Day) Camp Staff member as an agent for the undersigned, to consent to and authorize X-Ray examination, anesthetic, medical, or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provision of the Medical Practices Act on medical staff of any hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. It is understood that this authorization is given, in advance of any specific diagnosis, treatment or hospital care being required, to provide authority and power on the part of the aforesaid agent to give specific consent to any and all such diagnosis, treatment or hospital care which aforementioned physician in the exercise of his/her best judgment may deem advisable. (I)(We) hereby authorize any hospital which has provided treatment to the above-named minor to surrender physical custody of said minor to the above named agent upon the completion of treatment. (I)(We) understand and agree that payment of any medical or dental care is (my) (our) responsibility. (I)(We) understand and agree that COG7 / Northern CA Youth Camp cannot be held responsible for any person contracting viruses such as the cold or flu, including any strain of coronavirus, and allergies with similiar symptoms. By signing this registration form, I (we) also agree that photos and video's taken while at youth camp may be used for promotional purposes.

Parent or Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Payment Information:

Submit ONE check from each church made payable to:  
Church of God (Seventh Day); C/O Alex Hernandez  
2337 West Harvard Ave, Visalia, CA 93277

- Checks may be mailed or hand delivered.
- Payment is due upon camper's arrival.

Fill and submit electronically at the following website:



<https://forms.gle/wnxo8ykHMMqy3oycy>