# **CI-PNW 2017 Online Registration**

\* Poquiro

Ge	neral Information
1.	Registration Type * Mark only one oval.
	1st Time CI-PNW Camper
	Returning CI-PNW Camper
	Leadership Team (includes Leaders in Training / LITs)
	Church Youth Group Chaperone
	Clergy / Pastor
	Day Visitor or Guest (must check-in and check-out with CI-PNW Registrar)
2.	Enter Full Name * (First and Last)
3.	Enter Preferred Name This will be used for your name tag
4.	Indicate Sex *  Mark only one oval.
	Female
	Male
5.	Select Grade Level *
	Mark only one oval.
	7th Grade
	8th Grade
	9th Grade
	10th Grade
	11th Grade
	12th Grade
	1st Year Post-HS
	2nd Year Post-HS
	○ N/A
6.	Date of Birth (mm/dd/yyyy) *
7.	Will you be attending the entire duration of CI-PNW (Dec 26-30): *  All participants, leaders, and visitors must check in and out with the CI Registrar upon arrival and departure from the campsite. Indicate in the box Other what days you will be present Check all that apply.
	Yes
	Other:
Skip	to question 14.
Ch	urch Information
8.	Name of Home Church (if none, indicate "NONE") *
9.	Are you seeking a home church? *  Mark only one oval.
	I already have one

10. Name of Pastor or Youth Group Leader	
Emergency Contact	
11. Name of Local Emergency Contact (not attending CI-PNW): * Emergency contact must be 18+ years old. For contacts located outside of the United States, CI-PNW may require minimal reimbursement for fees incurred when making international calls.	
12. Relationship to You *	
13. Phone Number *	
Skip to question 20.	
Contact Information	
14. Phone Number *	
15. E-mail Address *	
16. Mailing Address *	
17. City, State, Zip *	
18. Country *  Mark only one oval.	
U.S.A. Canada Philippines	
Other  CI-PNW T-shirt	
19. Select T-shirt Size (Adult Sizes) * Mark only one oval.	
XS	
S	
○ M ○ L	
XL	
XXL	
Skip to question 8.	
Medical Information and Health His	tory
20. Please list any allergies or special dietary needs (if none, indicate "NONE"): *	
21. If you are taking any medications, please indicate which one(s) below (if none, indicate "NONE"): *  All medications must be brought in their original	
prescription bottles or over the counter containers.	

22.	Please indicate if you have any limitations to physical activities (if none, indicate "NONE"): *
23.	Is there any other medical information that our CI-PNW Nurse should have about you?
<u>!</u> 4.	Medical Insurance and Primary Health Care Provider (optional) Please indicate the name of the camper's primary health care provider and/or any medical insurance policy information that the individual has existing coverage.
: -	-PNW Medical Waiver
ou	s section hereby gives permission for the CI-PNW Camp Nurse to administer the following over-the- nter medications if the nurse deems it necessary. Dosages will be administered according to direction the bottle unless a physician directs otherwise.
	ase check "YES" or "NO" to allow the camp nurse to give your child the following:
25.	A. Anti-Inflammatory / Pain Medications: Ibuprofen (Advil) * "YES" indicates that you allow the camp nurse to give your child this type of medication
	Mark only one oval.
	Yes No
:6.	B. Anti-Inflammatory / Pain Medications: Acetaminophen (Tylenol) * "YES" indicates that you allow the camp nurse to give your child this type of medication
	Mark only one oval.
	Yes No
7.	C. Antacids / Anti-Nausea: Maalox (heartburn, sour stomach, and acid indigestion) * "YES" indicates that you allow the camp nurse to give your child this type of medication Mark only one oval.
	Yes No
8.	D. Antacids / Anti-Nausea: Pepto Bismol (heartburn, nausea) CONTAINS ASPIRIN * "YES" indicates that you allow the camp nurse to give your child this type of medication
	Mark only one oval.  Yes
	No No
29.	E. Throat / Cough Syrups: Robitussin (Cold & Flu), cough drops * "YES" indicates that you allow the camp nurse to give your child this type of medication Mark only one oval.
	Yes No
0.	F. Allergies: Benadryl (allergic reactions) * "YES" indicates that you allow the camp nurse to give your child this type of medication Mark only one oval.
	Yes No
1.	G. Other: Please indicate other medications: * Or type "N/A" if not applicable

#### **CI-PNW Medical Waiver (continued)**

32. First	Aid and Emergency Medical Treatment *
I reco	gnize that there may be occasions where the camper named above may be in need of first aid or
	gency medical treatment as a result of an accident, illness, or other health condition or injury. I do y give permission for CI to seek and secure any needed medical attention or treatment for the

camper named above including hospitalization, if in the nurse's opinion that such need arises. In doing so, I agree to pay all fees and costs arising from this action to obtain medical treatment. I give permission for my child to be transported to a medical center in an emergency situation.

$\bigcap$	Yes	

O No

## **SELF ADMINISTERING OF MEDICATION**

As the parent/guardian of this camper,

- I affirm and agree that my child has been instructed in the proper use of the medication and is physically, mentally, and behaviorally capable of administering the medication on his/or her own without camp personnel supervision. I also affirm that he/she has an adequate supply of the medication for the duration of the camp, and has the ability to properly store and secure the medication.
- I affirm that my child understands and agrees that he/she will use the medication only as prescribed by a
  physician and/or according to dosage instructions, and will not share or otherwise provide medication to
  any other person while at camp.

33. For this camper to carry and self-administer medication during Christmas Ins	stitute, this form
must be completed by an authorizing parent or legal guardian. *	

Make sure to include the name of medication(s) and "N/A" if not applicable.	the reason(s) for taking them. Otherwise type

#### **CI-PNW Media and Info Release**

<ol><li>I give permission for my gen</li></ol>	neral contact information to	be included in the CI-PNW member
directory (available only to	participants and members o	of the CI-PNW network): *

Mark only one oval.

	)	Yes	
$\subset$	$\overline{)}$	No	

35. In the event that I am videotaped and/or photographed throughout various camp activities by
CI-PNW staff and leaders, I (along with my parent/guardian, if under 18 years old) give
permission for my likeness to be used in publications of the CI-PNW ministry (ie. videos,
brochures, news articles, website): *

Mark only one oval.

	)	Yes
$\subseteq$	)	No

## Parent/Guardian Info and Consent

Required for all participants under 18 years old.

36. Parent/Guardian Signature (type "N/A" if over 18 years old) \*

By typing this name below, you are replacing a handwritten signature.

37. Parent/Guardian Contact Info (type "N/A" if over 18 years old) \*

Please enter an e-mail address or phone number

#### **CI-PNW Code of Conduct**

All campers, leaders, staff, and visitors must abide by these guidelines throughout our entire stay at CI. These minimum expectations must be followed in order to maintain the safest, most appropriate space for all to enjoy. THERE ARE NO EXCEPTIONS!

- 1. NOTHING ILLEGAL OR DANGEROUS IS ALLOWED AT CAMP. CI is a drug-free, alcohol-free, smoke-free, swear-free camp. Weapons are banned too.
- 2. MEET NEW PEOPLE AND HAVE FUN. Prompt attendance is required at all activities. No one should leave the campgrounds without authorized permission from the Camp Dean or Director and by notifying the

#### Registrar.

- 3. VISITORS ARE WELCOME. All guests must check in and out with the Registrar and are subject to day/night fees. Late arrivals and early departures for any campers must be pre-arranged.
- 4. MAINTAIN A POSITIVE ATTITUDE. Respect the authority of all CI-PNW leadership who have been trained to take on their specific roles.
- 5. RESPECT PROPERTY AND SPACE. Keep out of the personal space and property of others, as well as areas restricted by camp leaders and staff.
- 6. SHOW SIGNS OF LOVE through encouraging words and friendly greetings. Romantic displays of affection—public or private—are not allowed at camp.
- 7. READ YOUR BIBLE, PRAY EVERYDAY... Bring your Bibles to all worship sessions, family group meetings, and cabin devotions/sharing.
- 8. INCREASE THE PEACE. Cell phones, stereos, and other media players should be put away during all activities.
- OBSERVE ALL QUIET HOURS AND LIGHTS OUT. Each delegate must be in their assigned cabins/bunks during designated times. Campers are not allowed to switch cabins. CI security will be patrolling grounds to ensure everyone's safety.
- 10. CABIN/ROOM CHECKS AT THE END OF CAMP. Each cabin/room will be checked at the end of camp. Please take care of all facilities and grounds throughout our stay. Any damages that require replacement or repair fees are our responsibility.

#### **Liability Release and Authorized Signatures**

I have carefully reviewed the CI-PNW Code of Conduct and understand what is expected of me. I agree to abide by these guidelines throughout my entire stay at CI, otherwise I am aware that a serious violation could result in disciplinary action, early dismissal from camp without refund, and all transportation costs at my expense.

CI-PNW is a safe space with trained adult supervision. I recognize that any activity may still involve certain dangers and risks, including but not limited to the hazards of traveling, accidents, illness, forces of nature, and the actions of participants and other persons. I understand and agree that without some protection to its assets and leaders, CI-PNW would not be able to offer its activities to youth (especially minors) and to young adults. Therefore, in consideration of the right to participate at CI-PNW, I hereby release CI-PNW and its members from any and all liability, claims, and causes of action arising out of or in any way connected with participation in such activities. I personally assume all risks in connection with these activities and further agree to indemnify CI-PNW and its members from all related liability.

38	Partici	nant	Signature	*

By typing this name below, you are replacing a handwritten signature.

# 39. Parent/Guardian Signature (type "N/A" if over 18 years old) \*

By typing this name below, you are replacing a handwritten signature.

### **CI-PNW Refund Policy**

All registration fees are non-refundable after Dec 18th each year-- including no-show campers and cancellations due to inclement weather.

AVOID LATE FEES AND BE FAMILIAR WITH THE CI-PNW REFUND POLICY. CI-PNW is responsible for paying total group fees to the secured campsite for a guaranteed number of campers and meals, regardless of NO-SHOW campers and LAST MINUTE CANCELLATIONS.

For this reason, paid registration fees are partially refundable (minus a \$40 non-refundable processing fee per individual registration) for any cancellations made by December 18.

CI-PNW will also impose late fees and/or a 100% non-refundable policy to those who modify their CI registrations after the set deadline of December 18 -- this includes any changes due to inclement weather (one of the challenges of holding a Winter camp) or personal circumstances.

In special cases, the CI-PNW Registrar will consider making arrangements for churches/families who wish to replace a camper with paid registration with another camper to attend in their place. CI-PNW will not handle any refunds or exchange of fees in this situation.

Thank you for your understanding and planning ahead of time!

#### 40. Acknowledgement of the CI-PNW Refund Policy \*

Please verify that you have read and understand the CI-PNW Refund Policy Check all that apply.

I have read and understand the CI-PNW refund policy

### **Payment Options**

Listed below are the various payment types and options accepted at this time. Please note that we cannot hold a spot for you at camp until our CI Registrar has received your registration fee payment. Those applying for scholarships must still register by the appropriate deadline in order to be considered. REMINDER: Starting December 19th, registration is limited by space availability only; any remaining campers on STAND-BY who wish to attend CI must first check with the CI-PNW Director at <a href="mailto:director@ci-director.google-december-global-base

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#### pnw.org.

41. Select Payment Due *
Mark only one oval.
\$200.00 - First-Time Camper - (payment must be received by Dec 18)
\$225.00 - Returning Camper - (payment must be received by Nov 30)
\$125.00 - CI Leadership Team (includes Leaders in Training / LITs) - \$50.00 SAVINGS APPLIED - MUST ATTEND ALL TRAININGS (payment must be received by Dec 18)
\$175.00 - Church Youth Group Chaperone (age 22+) must have local church submit current background check (payment must be received by Dec 18)
\$100.00 - Clergy/Pastor support (must be received upon arrival to camp)
TBA - Guest/visitor (see daily rates)
42. Select Payment Type *
To be eligible for certain discounts, complete payment must be received by the stated due dates. Remember to indicate the campers' names in the check memo or PayPal notes in order to minimize confusion for the CI-PNW Registrar. Mark only one oval.
Check (individual) submitted to CI-PNW Registrar
PayPal (individual) submitted online
Check (from church youth group) submitted to CI-PNW Registrar
Cash (this option only available for stand-by registrations)
TBD - Clergy support or guest/visitor (see daily rates)



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