

What do I do with all of these BYG forms?!

RIGHT NOW -

- **BYG Summer Week Contract**
 - Read it - Sign it - Keep a copy.
 - Mail a copy back to camp RIGHT NOW!
 - Begin collecting deposits.
 - \$100.00 per camper before March 1st.
 - \$150.00 per camper after March 1st.
 - Deposits are non-refundable.
 - We suggest obtaining a deposit from the parents/guardians.



AS SOON AS POSSIBLE -

- **BYG Group Roster**
 - Mail this back to Camp Agapé as soon as possible, but **at least one month before your group's arrival** to camp.
 - The leader of your church's group should complete this form with your participants' names and info and list any camper concerns or roommate preferences.

6 WEEKS BEFORE YOU ARRIVE -

Copy and distribute the following as needed. Notice 3 of them need to be returned to camp before your group arrives. The sooner you return them, the better prepared the A⁺KB staff will be to serve your campers' needs...**At least one month before you arrive (by July 8th, 2010), we need:**

- **Camper Profile** - Read by the counselor to prepare for and better serve each camper.
- **Parent Profile** (2 sides) - Read by the counselor to prepare for and better serve each camper.
- **Health Form** – required by state law to attend camp.
- **What to Bring List and General Info** - Camper keeps this—do not mail this back to camp.



Remember, camp needs these forms by July 3rd:

- Group roster
- Camper profile
- Parent/guardian profile
- Health form

Forms received after July 3rd require an additional fee of \$25.00 per participant.



(919) 552-9421

2010 SUMMER BYG (Building Youth Groups) CONTRACT

This contract is entered into by A☩KB Ministries and the below named congregation and leader.

Congregation / town _____				
Estimated participants:	_____ F campers	_____ M campers	_____ F adults	_____ M adults

Dates: Sunday, August 8 – Friday, August 13, 2010

Cost for 2010: **\$390.00 per camper** \$25.00 is added per camper if forms are not received at Agapé at least one month prior to your group's arrival.

\$200.00 per leader Leaders are free at a ratio of one free adult for every seven campers.

Agapé ☩ Kure Beach Ministries will provide:

- A quality trained staff of Counselors and Team Leader.
- Pre-program planning meetings as requested by the congregation.
- A copy of all required registration and release forms to be reproduced as needed.
- Site/Facilities for hosting the BYG week.
- Housing and meals for BYG campers and church leaders as determined by church.
- Programmed activities for BYG campers when campers are not in sessions with leaders.
- Six days (Sun. afternoon-Fri. afternoon) of quality, relationship-based programming for BYG campers.



Each participating congregations will provide:

- Completed group roster indicating campers' names, grades, and genders AND completed camper health forms, and camper/parent profile forms given to Agapé at least one month prior to your group's arrival.
- Adherence to the American Camp Association (ACA) and Agapé policies for health and safety.
- **FINANCIAL OBLIGATIONS –**
 - A non-refundable deposit of \$100.00 per camper upon the signing of this contract--due on or before **February 1st**. After February 1st the deposit amount increases to \$150.00 per camper. Each congregation's minimum deposit is \$300.00.
NOTE: We encourage you to obtain the deposit from the parents to promote their commitment.
 - Final balance payment to be received by A☩KB Ministries no later than **the first day of your program.**
 - Additional fee of \$25.00 per health forms, camper profiles, parent profiles, or rosters that are not returned to Camp Agapé at least one month before your group's arrival.

Failure of Agapé to meet their responsibilities can result in withholding the payment due.

Failure of the congregation to meet their responsibilities can result in the termination of the Summer BYG Week and/or further financial obligations.

Agapé ☩ Kure Beach Ministries Representative

Date

☩ I understand the responsibilities of Agapé ☩ Kure Beach Ministries pertaining to the Summer BYG program. I also understand the responsibilities of my congregational group--prior to and during the Summer BYG week. I agree to abide by the guidelines set forth in mutual commitment to sharing the Gospel of Jesus Christ with all people.

Congregational Representative

Date

Please return this contract to camp and keep a copy of this contract for your records.

Agapé ☩ Kure Beach Ministries – ATTN: Summer BYG - 1369 Tyler Dewar Ln. – Fuquay-Varina, NC 27526

2010 - BYG SUMMER WEEK GROUP ROSTER

CHURCH: _____ TOWN: _____

<u>NAME OF CAMPER</u>	<u>Grade entering in Fall 2010</u>	<u>Male</u>	<u>Female</u>	<u>Concerns</u>
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Camper Health History Form

(page 2)

Camper Name: _____
Last First Init.

Mental, Emotional, and Social Health: Check "Yes" or "No" for each statement.

Has the camper:

1. Ever been treated for attention deficit disorder (ADD) or attention deficit/hyperactivity disorder (AD/HD)? Yes No
 2. Ever been treated for emotional or behavioral difficulties or an eating disorder?..... Yes No
 3. During the past 12 months, seen a professional to address mental/emotional health concerns? Yes No
 4. Had a significant life event that continues to affect the camper's life? (History of abuse, death of a loved one, family change, adoption, foster care, new sibling, survived a disaster, others)..... Yes No
- Please explain "Yes" answers in the space below**, noting the number of the questions. The camp may contact you for additional information.

Immunization Record:

Date of Last Tetanus _____ DPT _____ Polio _____ MMR _____

If your camper has not been fully immunized, please sign the following statement: I understand and accept the risks to my child from not being fully immunized.

Signature of Custodial Parent/Guardian: _____ Date: _____ Relationship to Camper: _____

- Medication:** This camper will not take any daily medications while attending camp.
 This camper will take the following daily medication(s) while at camp:

"Medication" is any substance a person takes to maintain and/or improve their health. This includes vitamins & natural remedies.
Please review camp instructions about required packaging/containers. Many states require original pharmacy containers with labels which show the camper's name and how the medication should be given. Provide enough of each medication to last the entire time the camper will be at camp.

Name of Medication	Date Started	Reason for taking it	When it is given	Amount or dose given	How it is given
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> Other time: _____		
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> Other time: _____		
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> Other time: _____		

The following non-prescription medications may be stocked in the camp Health Center and are used on an as needed basis to manage illness and injury. **Cross out those the camper should not be given.**

Acetaminophen (Tylenol)	Phenylephrine decongestant (Sudafed PE)	Calamine lotion
Ibuprofen (Advil, Motrin)	Pseudoephedrine decongestant (Sudafed)	Antibiotic cream
Antihistamine/allergy medicine	Guaifenesin cough syrup (Robitussin)	Aloe
Diphenhydramine antihistamine/allergy medicine (Benadryl)	Dextromethorphan cough syrup (Robitussin DM)	Bandaid Anti-Itch Gel (.45% camphor)
Calcium Carbonate (Tums, Antacid tablets)	Generic cough drops	Isotonic Solution (eyedrops)
Bismuth subsalicylate for diarrhea (Kaopectate, Pepto-Bismol)	Sore throat spray	Isopropyl Alcohol (ear drops for swimmer's ear)

Health-Care Providers:

Name of camper's primary doctor(s): _____ Phone: () _____

Medical Insurance Information: This camper is covered by family medical/hospital insurance Yes No

Please include a copy of your insurance card; copy both sides of the card so information is readable.

Insurance Company _____ Policy or ID # _____ Group Plan # _____
 Subscriber _____ Insurance Company Phone Number (_____) _____ Where insured is employed _____
 Address for claims _____

Check here if you do **NOT** give permission for A☩KB Ministries to photograph your child for camp promotional purposes (brochures, SmugMug, etc.) No names are used.

Parent/Guardian Authorization for Health Care:

This health history is correct and accurately reflects the health status of the camper to whom it pertains. The person described has permission to participate in all camp activities except as noted by me and/or an examining physician. I give permission to the physician selected by the camp to order x-rays, routine tests, and treatment related to the health of my child for both routine health care and in emergency situations. If I cannot be reached in an emergency, I give my permission to the physician to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for this child. I understand the information on this form will be shared on a "need to know" basis with camp staff. I give permission to photocopy this form. In addition, the camp has permission to obtain a copy of my child's health record from providers who treat my child and these providers may talk with the program's staff about my child's health status.

Signature of Custodial Parent/Guardian _____ Date: _____ Relationship to Camper: _____

What Have We Forgotten to Ask?

Please attach any additional information about the camper's health that you think important or that may affect the camper's ability to fully participate in the camp program.

AGAPÉ ✠ KURE BEACH MINISTRIES
1369 Tyler Dewar Lane, Fuquay-Varina, NC 27526
Phone: 919-552-9421 FAX: 919-552-0720

Camp Agapé - RESIDENT CAMP CAMPER PROFILE

For Office Use only
Code _____

Name: _____ [] Male [] Female

Camp Program: _____ Week Date: _____

Roommate requested _____, this camper must also request you.

Dear Camper,

This is a chance for you to indicate to your counselor some of your interests in coming to camp. Completing this form and returning it will help your counselor prepare for your arrival.

I expect my counselor to:

I would like to do these things at camp:

While at camp, I would like to learn:

Some of the things I can do well are:

I struggle with questions about _____ prayer, _____ faith, _____ death, _____ morals, _____ sin, _____ God

Please list other topics of concern:

Please return completed forms to Camp Agapé at least two weeks before your arrival.

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AGAPÉ ✠ KURE BEACH MINISTRIES

1369 Tyler Dewar Lane, Fuquay-Varina, NC 27526

Phone: 919-552-9421 FAX: 919-552-0720

Camp Agapé - RESIDENT CAMP PARENT PROFILE

For office use

Code _____

To Parents: Our staff can provide your camper with the best possible camp experience this summer if we know as much about him/her as possible. We would appreciate your courtesy and interest if you would fill out this profile. It will be confidential.

Camper's Name: _____ Age: _____ Birth date: _____

Well-liked nickname: _____ Grade entering: _____ Sex: _____

Address: _____
Street City State Zip

Years at camp: _____

Father's name: _____ Mother's name: _____

Age of brothers: [] [] [] [] Age of sisters: [] [] [] []

Pets (type and name): _____

Other relatives living at home? _____

In case of divorce or separation, with whom does the camper live?

_____ name relationship

Major interests and/or hobbies?

Major talents, skills, and abilities?

When is your camper most creative?

What responsibilities does your camper have at home?

Are there any circumstances or behaviors that you think will affect your camper at camp?

General health: robust: _____ normal: _____ below average: _____ sickly: _____

Any physical disabilities? _____ describe: _____

Any special medications? _____

Have you taken this child off of any medications he/she takes during the school year. ____ YES ____ NO

If yes, what medications and why? _____

What is the swimming skill of your camper? very good _____ fair _____ beginner _____

What experience has your child had in living and working within a group of people?

What social contacts does your camper have with others his/her age?

Makes friends: easily _____ fairly easily _____ with difficulty _____

Most friends are: older _____ younger _____ same age _____

Relates best to adults who are _____ male _____ female _____ either

Other information that would be helpful to a counselor:

What objectives do you have in sending your child to camp? (What do you hope your child will get out of this experience?)

Signature: _____
Parent/Guardian relationship date

Parents/guardians: please return completed forms to Camp Agapé at least two weeks before your camper's arrival.



1369 Tyler Dewar Ln
Fuquay-Varina, NC 27526

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Fax: (919) 552-0720

agape@agapekurebeach.org
www.agapekurebeach.org

WHAT TO/NOT TO BRING



Our facilities are comfortable, yet short on storage space; pack carefully and plan to live out of your suitcase. You may also want to mark camper's clothes with initials. See the enclosed sheet for a packing list. Also pay special attention to the items to NOT bring to camp. **Camp reserves the right to hold any of the "do not bring" items while the camper is at camp. Legal action may be taken in cases involving alcohol, tobacco and other drugs, fireworks and weapons.** Although camp respects the privacy of all attendees, for safety sake we reserve the right to search any personal items we feel necessary, with or without notification.

CHECK-IN/CHECK-OUT



Check-in – Sunday (3:30-4:30)

Check-out – Friday afternoon
(usually between 1:00-3:00)

Check-in and out takes place at the Woodlands Center. After you sign in at the check-in table a counselor will show you to your camper's lodging assignment. It is important to your camper that you arrive on time. If you are delayed please let us know! Make sure you check-out with camp staff before heading home.

ARRIVAL AT CAMP

Check-in with the camp staff at the registration table in front of the Woodlands Center. Drive past the Woodlands Center and park all cars in the parking lot field on the right. Have any medications and camp store spending money with you and ready to turn in at the registration table.



"SNAIL" MAIL

Campers love getting mail! Write often--even sending a letter out to be received the first day of camp. Camp addresses are:

Camp Agapé
1369 Tyler Dewar Lane
Fuquay-Varina, NC 27526

Kure Beach Center
601 S. Ft. Fisher Blvd.
Kure Beach, NC 28449



Care packages are also fun to receive, but we ask that **NO food, candy, or gum be sent to campers.** Sending comics, puzzle books, games, or small presents is fine.

E-MAIL



Campers do not have access to computers to send e-mail while they are at camp, but they may receive e-mail via Bunk1. See the enclosed letter on how this mailing service works.

HOMESICKNESS

If your parents are inclined to be "homesick" for you, please assure them that you will write often. Please remind parents that, due to the number of campers, campers are not permitted to use the telephone or carry cell phones with them throughout the week. Please ask that no food items be sent, since there is plenty of food provided.

SPENDING MONEY

The camp fee covers lodging, meals, insurance, educational materials, basic craft supplies, and staff supervision. There are several times when campers may desire additional spending money. The camp store is open at certain times each day and stocks snacks, drinks,





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camp shirts, souvenirs; price range \$0.50-\$30.00. A weekly offering is also collected for a needy cause each summer.



-Special crafts: Some of the more elaborate craft activities are priced to offset cost of materials. These activities are optional and other activity choices are available during these times. None are more than \$5.00.

-Special activities: At the beach, campers will visit the pier and aquarium. Both have gift shops.

Between \$10 and \$30 is usually plenty of spending money. All resident campers except Beach and Servant Event campers will deposit their money in the camp bank and charge their items each day. Beach and Servant Event Campers will handle their own funds. Rocketry Campers may want additional cash to purchase rockets. There is enough money allotted as part of the camp fee for 1 or 2 rockets – depending on the skill level purchased.



TELEPHONE

Camp Agapé office: 919-552-9421.
Kure Beach office: 910-458-0783. These numbers are for emergency use only. **It is our policy that while at camp campers do not use the telephone or carry cell phones.**

CAMP HEALTH FORM

All campers must have a completed Health History form in order to attend a camp session. A parent or guardian should fill out the form. It must include the parent/guardian signature.

STAFF

Agapé † Kure Beach Ministries highly values all campers. Our staff members are carefully selected for their maturity and Christian faith. All staff participates in a 13-day training session before campers arrive. Safety and Christian role modeling are high

priorities for our staff. We thank you for entrusting your campers to us.

MEDICAL CARE

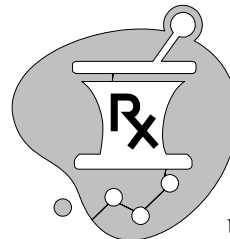
Red Cross/CPR certified first aiders are among our staff in residence. In medical emergencies campers will be taken to Physician's Urgent Care or Western Wake Medical Center. It is very important that the parental release on the health form is signed, so that needed care may be given in an emergency situation.



INSURANCE

Agapé † Kure Beach Ministries provides umbrella liability coverage. In case of an accident requiring medical care, Agapé can provide for out of pocket expenses or assist with expenses above limits. Agapé † Kure Beach Ministries does not provide preventive or health care insurance on sickness.

MEDICATION



If your child must bring medication to camp, please furnish written instructions of dosage and schedule for its use. **Medication should be brought in prescription containers.** Upon check-in/drop-off on the Sunday you arrive, turn in all medications at the registration desk with your child's name on each container. *(Tylenol, Advil etc. are part of our supplies; please do not pack these.)* Our staff will supervise administration of all medication.

DIRECTIONS

Please note that personal GPS and internet mapping sites are not always reliable. For the best directions, please check our website, www.agapekurebeach.org.

Camper Checklist

What to bring:

- sleeping bag or bed sheets--pillows and blankets are provided, but **bring your own pillowcase**
- two towels--one for shower, one for pool
- toothbrush, toothpaste, cup, comb, soap, shampoo, etc.
- clothes for entire week--appropriate for outdoor activities
- footwear, **two pair--must be closed toe and covering heel**
- swim suit(s)--we ask that it be modest
- laundry bag – plastic is fine
- light coat or sweatshirt
- poncho or raincoat
- old sneakers or water shoes for rainy days or creek walks
no flip flops or sandals (except beach program)
- sunglasses
- cap or hat
- books or quiet game
- flashlight
- insect repellent, sunscreen
- water bottle
- Bible
- Spending Money for Camp Store



(919) 552-9421

What to NOT bring:

- chewing gum
- snacks or food of any kind
- **cell phones**, radios, CD players, MP3 players, electronic games, any other electronic devices
- candles or lanterns
- alcoholic beverages
- tobacco products of ANY kind
- drugs not prescribed by a doctor
- fireworks of ANY kind
- knives/firearms/weapons
- Anything we haven't listed that we feel necessary

If you think we might want to confiscate it, don't bring it.

Camp reserves the right to hold any of the above items while the camper is at camp. Legal action may be taken in cases involving alcohol, tobacco and other drugs, fireworks and weapons. Agapé ✝ Kure Beach Ministries is not responsible for damage to or loss of confiscated items.



Stay in touch this summer with One-Way Camper Email!



We are excited to tell you about our partnership with Bunk1.com! Bunk1's secure, easy to use, summer website services let you stay in touch with your camper all summer!

RETURNING PARENTS: If you had an account at this camp last summer, you can continue to use your old username and password. Simply sign in at the link below. The first time you visit the site you will be prompted to update your contact information and re-activate your account.

GET STARTED TODAY

To set up a new account and visit our Online Community:

1. Go to our website at agapekurebeach.org
2. Click the flashing "Camper Email" button *
3. Click "Register Now"
4. Enter your Pre-Approved Registration Code: 9740AG1
5. Fill out all the required information
6. Purchase Bunk Note credits (you will need a credit card)
7. Send an email to your camper!

* If you cannot find this button, go to www.AgapeKureBeachMinistries.bunk1.com instead and continue on to the next step

** For your camper's safety, please do not share the Pre-Approved Registration code above.

FREQUENTLY ASKED QUESTIONS

How do I send a Bunk Note (one-way email) to my camper?

Follow the instructions above except, after registering, simply sign in and click on the Bunk Notes button. Enter your camper's name, select the correct cabin, type your message, and hit the "Send" button.

Why do I have to pay to send Bunk Notes (one-way email)?

Each morning, the Bunk Notes system bundles and sorts the messages for us to print out and distribute to campers. It also protects us from computer viruses and allows us to easily manage these emails. Your payment helps us cover the cost of the system, paper, ink, and labor and, more importantly, frees us to do what we do best

– be with your kids! Bunk Note credits cost \$1 each and are purchased in packs of various sizes.

Can other relatives use these services?

Certainly. Once you have set up your account, you will be able to invite other people to access these services.

What do I do if I lost my username and password?

You can get it online by going to www.Bunk1.com and clicking on the link "Lost Your Password?" (to the left of the page below the sign in button). You will receive an email with your username and password within a few minutes.

QUESTIONS OR PROBLEMS?

Please call Bunk1 at 1-800-216-9472 or go to www.bunk1.com/contact.asp

