



JUNE 14-21, 2025

GREAT LAKES

BIBLE CAMP

Parents and clubber

We are making plans for camp this year, Our camp will take place at Camp Manitoumi approximately 20 miles east of Peoria Ill. and five miles north of Metamora Ill.

Each camper will participate in exciting bible study that is gear for their age group. High energy team competition will help teach campers about teamwork and building relationships. A chapel service each evening will include worship and a message that challenge campers in their relationship with our Lord.

If you have any question, contact our coordinator Connie call or text 309-781-5839, email camp@greatlakesbible.com

Please print and fill out forms below mail too:

Great Lakes Bible Camp Connie Frenell

P.O.Box 174 Barstow, Ill 61236

Middle school

Going into 5th-8th grade

High school

**Going into 9 grade-
Completed 12th grade
this year**

**Train for sevice
puppets, drama, music,
games,**

For a Day of Mission

Discount available

Up to \$50.00

Earlier registration

\$30.00

By April 1,2025

**Earning Timothy,
Meritorious,Citation**

\$20.00

**Compete Awana
Book \$10.00**

**Bring a Friend
Each \$10.00**



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Great Lakes Bible Camp

June 14-21, 2025

Total \$450.00

Discounts

Please use a pen and **print clearly**. We recommend that you keep a copy for yourself.

CAMPER INFORMATION

Church Sponsor \$ _____

Full Legal Name: _____ Date of Birth: _____ Age: _____

Badge, Name : _____ Male Female (circle one)

Address: _____ City: _____ State: _____ Zip _____

Dad's _____ Phone (_____) _____ Mom's _____ Phone (____) _____

Confirmation will come to this E-mail address: _____

(Circle one) Grade next fall: 5 6 7 8 9 10 11 12 Graduate Adult Shirt Size: S M L XL XXL

If you have ONE roommate preference, please give their full name _____

EMERGENCY INFORMATION

In the event an emergency occurs while a parent or guardian is otherwise unavailable.

The person listed below has agreed to be responsible for my camper in my absence.

First contact name _____ Mobile Phone _____

Second contact name _____ Mobile Phone _____

TO BE FILLED IN BY THE APPLICANT'S AWANA COMMANDER OR DIRECTOR

Church: _____ Registration Number: _____

Phone Number: _____ Email: _____

Handbook worked in this year

- | | | |
|---|---|--|
| <input type="checkbox"/> T&T Evidence of Grace | <input type="checkbox"/> Prior trek Book" | <input type="checkbox"/> Journey (1) Advocates |
| <input type="checkbox"/> T&T Grace in Action | <input type="checkbox"/> Trek (1) "His Story" | <input type="checkbox"/> Journey (2) Disciples |
| <input type="checkbox"/> T&T Agents of Grace | <input type="checkbox"/> Trek (2) "His Love" | <input type="checkbox"/> Journey (3) Witnesses |
| <input type="checkbox"/> T&T Discovery of Grace | <input type="checkbox"/> Trek (3) His people | <input type="checkbox"/> 2 handbooks from older series |

We Memorize in: (circle translation):

King James NKJ NIV ESV This year has earned _____ Award

My Director's Signature (required for acceptance)

Phone number

Parental Consent and Release of Liability

IMPORTANT: THIS DOCUMENT CONTAINS A RELEASE OF LIABILITY. YOU ARE ADVISED TO REVIEW IT CAREFULLY

I understand and agree that participation in Great Lakes Bible Camp is a privilege to which my minor child named below is not otherwise entitled. In consideration for that privilege, I am signing this Parental Consent and Release of Liability.

Consent to Attend Camp I hereby give permission for Camper to attend and participate in ALL of the Camp.

Release of Liability Prior to Camper participation in Camp activities, I acknowledge that involvement of Camper in the Camp may involve risk of property damage and of personal injury, illness or even death of Camper, including but not limited to the risks arising from transportation-related activities, recreational activities, accidents in the outdoors and rustic facilities, adverse weather conditions, and injuries and illness as a result of food-borne illnesses and allergic reactions. In addition, I understand that there may be other risks inherent in Camp activities of which I may not be presently aware.

By signing this Parental consent and release of Liability, I warrant that my Camper is fully capable of safely participating in all Camp activities, and I expressly assume all risks of Camper's participation, whether such risks are known or unknown to me at this time. I further release Great Lakes Bible Camp, Host Camp and their directors, officers, employees, volunteers, and agents, and other campers at the Camp, from any and all claims that I or Camper may have against any of them as a result of property damage or personal injury, illness or death of Camper as a result of participation in Camp activities, whether on or off Camp grounds. I agree that this release includes the ordinary, special and inherent risks described above, and other risks that I may not foresee or be aware of at this time. This Release of Liability is given on behalf of myself, Camper, and the heirs, family, estate, administrators, executors, personal representatives and assigns of me and camper.

Other releases and Acknowledgements I understand that, while Camper is participating in Camp activities, photograph, film audio recordings and videotape of Camper may be taken for use in brochures, videos, releases to the press, and various Great Lake Bible Camp publications and other work product. I do hereby irrevocably grant Great Lakes Bible Camp permission to record, display and/or reproduce my Child's name (first name only), likeness and voice on audio and/or video tape, film or other media to edit and otherwise modify such media at its discretion, to incorporate the media into any work product, and to use or authorize the use of such media or any portion thereof in any manner or media or by any means, methods or technologies now known or hereafter to be known.

I understand that Great Lakes Bible Camp does not provide transportation to or from the Great Lakes Bible Camp program and do hereby take responsibility for either providing or arranging for transportation of Camper, and for ensuring that Camper will arrive and depart by the scheduled dates and times.

I will ensure Camper only brings clothing that adheres to the Camp Dress Code that will be sent in the acceptance package. If Camper fails to abide by established rules, standards of conduct and Camp Dress Code, Great Lakes Bible Camp staff reserve the right to send Camper home. If it becomes necessary to send Camper home, I hereby agree to provide transportation or to make travel arrangements for Camper and to assume the cost of these expenses

To the Extent any provision of this document is found to be not enforceable, such provision shall be deemed severable and shall not affect the enforceability of any other portion of this document, and shall be reformed to be in compliance with the law and construed to most nearly reflect the intent of the parties.

Consent to Medical Treatment

If Camper experiences an injury or illness, or has other medical needs, I authorize the Camp’s employees, volunteers, and agents to make such arrangements for Camper’s health and safety, including but not limited to first aid, emergency medical care, ambulance or other transportation to hospital, medical office, or clinic, testing and examination, and hospital care, and other medical care and treatment (including dental care as they feel are appropriate in the circumstances). I further agree that I am fully responsible to pay all charges and expenses relating to such care, transportation and treatment, and I hereby fully release Great Lakes Bible Camp and its directors, officers, employees, volunteers and agents from any claims, including claims for medical charges, prescription costs and other expenses I might have as a result of such care, transportation and treatment. My signature below also serves to indicate my willingness for my Health Insurance Company (please provide details in the Medical Information section) to be billed for any and all medical fees and services should they be needed. I agree that I will pay all charges and expenses not covered by insurance

Please copy the front and back of your insurance card and attach to this form

Legal Name Camper _____ Birth Date _____
Medical Insurance Co. _____ Policy Number _____
Insured’s Name _____
Address _____ Phone (____) _____
Doctor Name _____ Phone (____) _____
Date of last tetanus _____ Date of last physical _____
List any medical/food allergies or behavioral problems (sleep walking, bed wetting, depression, etc.) of Camper.

List any medication your camper will be while at camp? _____

All medications are to be given to the camp medical personnel at registration.

The camp medical personnel has our (my) permission to provide my Camper with non-prescription medicines as deemed necessary. Yes _____ No _____ Please list any over-the-counter medicines that should not be given to Camper.

Does Camper have any physical condition or limitations that would restrict participation in all camp activities? Yes _____ No _____ provide details:

I represent and warrant that I am a parent or legal guardian of the Camper named above and have the full power and authority to enter into this Parental Consent and Release of Liability on behalf of the Camper. By signing below, I acknowledge that this document has been read and understood by me, and also confirm that all information provided is accurate. Each legally responsible parent/guardian is required to sign below.

1st Parent or Guardian signature

2nd Parent or Guardian signature

Name Printed

Name Printed

Date Signed

Phone

Date Signed

Phone

Please copy the front and back of

Your insurance card

and attach to this form

Here please