

28th Annual



June 9th – 15th 2024

Camp is for ages 6 to 17 years old

ACTIVITIES WILL INCLUDE

**Bible Lessons, Swimming Pool, Archery, Riflery, Canoeing
Tubing, Handcrafts, Skits, Fun and Games, Good Food, Sports & More**

Check-in is June 9th, at 3:00 p.m. @ The Chapel

Please report directly to the Chapel on arrival!

Camp activities will begin at 5:00 p.m.

Camp Conclusion

on Saturday, June 15th at 11:00 a.m.

Our Purpose

The Purpose of Florida Youth Grace Camp is to evangelize children through the clear preaching of the gospel of the grace of God, so they may have the assurance of eternal life. Our goal, secondly, is to build up the youth through the teaching of God's Word rightly divided, so that they may grow up to be productive and consecrated members of the body of Christ. Finally, we desire to provide them with an exciting camp full of fun and fellowship which will provide lifelong memories and friendships.

Cost of Camp is \$295.00



\$25 discount for registration form and deposits received by May 1st

Make Checks out to GraceWay Bible Church and mark "Grace Camp"

Send to: FYTGC, P.O. Box 866, Edgewater, FL, 32132

PARENTS: Please keep these pages for reference before and during camp.

Policies for all persons at Florida Youth Grace Camp and Camp Horizon.

- Christian standards and conduct are upheld for all campers, staff and guests. No profanity, drugs, tobacco use, vaping, juling, smoking or alcohol are allowed.
- Modesty and discretion is the guide for dress and swimwear.
- Camp visitors need to contact the director prior to visiting the camp.
- No one may leave the campgrounds without the director's prior permission.
- Camp director reserves the right to dismiss any camper, staff or visitor. Campers will be sent home if they fail to cooperate with staff or violate camp rules.
- Florida Youth & Teen Grace Camp does not discriminate because of race, creed or nationality.
- Temperature checks, and lice checks will be performed for all campers and staff.

SPONSORSHIP

Camp is sponsored by participating independent King James Bible Believing Florida Grace Churches:

For more information about the camp please feel free to call Robert Bell at (386-846-8852) or email at floridagracescamp@gmail.com or visit our website <http://www.floridagracescamp.com>

WHAT TO BRING CHECKLIST

Please mark all items with your child's first and last name.



THIS IS CAMP - Please do not bring new or expensive clothing, shoes, jewelry, Bibles or other such items.

They may be LOST OR DAMAGED!

- ___ KJV Bible, notebook, pen or pencil
- ___ Bedding, or sleeping bag and pillow!!
- ___ Plenty of clothes!!
- ___ White t-shirt
- ___ Toiletries, insect repellent, sunscreen, laundry bag, and at least 3 towels and washcloths
- ___ Two pairs of tennis shoes, rainwear, flip flops, and modest swimwear (NO BIKINIS)
- **NO Cell Phones. If phones are seen out, they will be taken away and stored for the week and given to the parents upon their arrival. Also no radios, tape or CD players, toys, or electronic games are allowed.**
- **NO food items or snacks. We will provide 3 meals per day and an evening snack.**



MUSIC MINISTRY

If you play an instrument or enjoy singing, please come prepared to share your talent with us.

NO PHONE CALLS may be made or received by campers. *Except in Emergencies.* Please see the director.

For emergencies during camp call: Camp Horizon @ (352) 728-5822 / Robert Bell @ (386) 846-8852 (Cell Phone)

SPECIAL OFFER

Turn in your form and deposit by May 1st to receive \$25 off of camp!

LOCATION

Camp Horizon is located about 30 miles south of Ocala and 35 miles northwest of Orlando, on the out-skirts of Leesburg. Heading north on Turnpike: Take exit 285, turn right (north) Leesburg US 27. From I-75: Take the Leesburg, Wildwood exit (#66) SR44, turn east on 44, and go approximately 15 miles turn right on Sunnyside Drive (look for Camp Horizon sign). From Orlando: Take 441, 3 miles north of Lake Square Mall, turn left on Sleepy Hollow Road (Texaco station on left at turn). From 301 to 441 left at Junction 27/441 in Leesburg. Turn right on Sleepy Hollow Road.

For a map and directions go to: <http://www.camphorizon.org/pdfs/Map2Camp.pdf> **If Lost Call: Phone: (352) 728-5822 or 728-8403**

2024 FLORIDA GRACE CAMP APPLICATION FORM

CAMPER INFORMATION:

Last Name First Name [] Nick Name - [] Middle Name

Street Address City, State, Zip Code

Home Phone # Birth date Age

Email Address () parent or () camper BOY / GIRL
(circle one)

Parent / Guardian's Full Name and Phone # () work or () cell.

Emergency Contact Person and Phone # Person picking Camper up (if different than parent / guardian)

Home Church or Fellowship

Each Camper will receive a T-shirt. Please circle size needed:

Youth: Small Medium Large Adult: Small Medium Large XL XXL

Very Important: Shirt orders will be placed on May 10th, registration **must** be in by May 1st for your child to receive a shirt.

___ Enclosed is \$50 non-refundable registration fee. ___ Enclosed is payment in full of \$295
I will pay the balance of \$245 by June 1st.

Camper Health Information

Height: _____ Weight: _____ Hair: _____ Eyes: _____ Race: _____

Allergies to medicines or foods:

Describe any physical or behavioral special needs:

Camper is being treated for, or may have problems with (please circle all that apply & attach an explanation if needed):

Please identify any health problems of camper:

___ heart ___ lung ___ ears ___ skin ___ tonsils ___ sinus ___ appendix
___ hernia ___ asthma ___ allergies ___ hay fever ___ penicillin

other, please specify _____

Date of last tetanus booster: _____

[] See attached notes / documents **SPECIAL CARE:** []-Contacts []-Glasses []-Braces []-Retainer []-Other

All medications must be checked in with the Camp Nurse/Medic, who will administer the prescribed dose / frequency. You will receive a form to list medications and dosages. This is to be given to the nurse at registration with all medications in a zip-lock bag. Prescription drugs must be in their original labeled containers. Over the counter medications (vitamins, minerals, etc) must be in their original bottle with complete instructions for use. Asthmatic campers may keep their inhalers - you may choose to send a backup inhaler to leave with the nurse. Topical creams, eye drops or ear drops may be kept in the cabin. **If your camper has a special need, please attach a note that explains this in detail.**

ATTACH A SEALED ENVELOPE WITH:

Explanation of all of the above / Last 3 months medical history (if any) / Other appropriate information / All medicines as they will be maintained by the camp nurse (medic) / Physician and insurance information

I give permission for the Health Counselor (RN, LPN, Paramedic) to administer any of the following over-the-counter medications or a generic equivalent (**except those I have put a line through**):

For Pain / Fever: Acetaminophen (Tylenol) ; Ibuprofen (Motrin) ; Aspirin

Topical: Antibiotic Ointment (Neosporin, Bacitracin, Polymixin) ; Benadryl ; Calamine ; Camphophenique Benzocaine (tooth drops) ; Hydrocortisone Wax (for braces)

Antihistamine: Benadryl ; Triaminic ; Neosynephrine ; Afrin ; Dimetapp ; Sudafed

Expectorant: Robitussin Mucinex **Eye Care:** Artificial Tears

Gastrointestinal: Emetrol ; Imodium ; Pepto-Bismol ; Antacids (i.e. Tums, Mylanta, or Maalox) ; Metamucil/Citrucel laxative / stool softener of choice

Fungus: Lotrimin ; Tolnaftate ; Clotrimazole **Sore Throat:** Cloraseptic ; Zinc

Swimmer's Ear: Swimmer's Ear Drops **Lice:** "Rid" (Generic: Permethrin) ***Children MUST be free of lice on arrival ***

*** Note: We will need to do an inspection upon arrival! ***

[] **Insurance Card Attached (copy)** [] No Health Insurance

Please attach copy of insurance card (both sides). The parent/guardian is responsible to provide adequate medical insurance and will be responsible for any and all medical bills incurred due to emergency care. A qualified nurse or paramedic on the campgrounds will provide First Aid, and if necessary, campers will receive professional medical care at Leesburg Regional Medical Center which has a fully staffed emergency room and an urgent care walk-in clinic. **YOU WILL BE CALLED FOR APPROVAL.**

HEALTH CARE AUTHORIZATION AND RELEASE:

Parent/guardian hereby authorizes camp staff to approve all examinations, treatments, and hospitalization as may be deemed necessary for the health and welfare of the camper. Parent/guardian agrees that all related expenses shall be their responsibility, and will not hold the sponsoring ministries, individuals or Camp Horizon involved liable for any accident or illness.

PARENT AND CAMPER AGREEMENT (READ CAREFULLY BEFORE YOU SIGN)

The following is understood and agreed to by the camper and the parent or guardian signing below:

1. The camper applying to Florida Grace Camp is in good physical and emotional health and willing to submit to camp authority, standards of behavior, and discipline.
2. **The parent/guardian signing below is in legal custody of the child** and is legally responsible for payment of the fees and any damages or other expenses incurred by the camper. **Conditions of custody, if applicable, will be fully communicated to Camp Horizon in writing.** *Please notify shared guardians of your camp schedule.*
3. Florida Grace Camp is empowered to obtain emergency medical treatment for the camper if necessary and all expenses are the parent's responsibility.
4. The health counselor (RN,LPN,Paramedic) may provide first aid and administer prescription and non prescription medications according to policy.
5. Florida Grace Camp has permission of the camper's parent/guardian to take the camper on supervised trips off the Camp property including canoe trips, sailing trips, hikes on neighboring property, health-care visits, or other supervised outings unless notified otherwise in writing.
6. If the camper violates any Florida Grace Camp or **Camp Horizon Standards of Conduct**, (copy on request), or engages in any activity which the Camp believes is, at the sole discretion of the Camp, inconsistent with its principles, the camper may be required to leave the Camp immediately. The parent/guardian will be required to come pick up the camper at the earliest possible time. **Fees are non-refundable if campers are sent home for disciplinary reasons.**
7. We take cabin photos and both video and still pictures of campers in action. Photos are published on the web. Pictures of activities are used for promotional purposes without any financial reward to the subject(s).
8. We provide an address list to campers and staff that participate each week unless you notify us in writing otherwise or put a line through this statement and initial it.
9. All camper belongings are subject to inspection. **Items that are not allowed at camp (i.e. cell phones / electronics) will be removed and placed in safe storage.**
10. I/We release All Sponsor Ministries and Evangelistic Horizons Unlimited Inc., its officers, employees, and volunteers from financial responsibility for injury sustained by my child while at Camp Horizon. Any claim or dispute arising from or related to this agreement shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the *Rules of Procedure for Christian Conciliation* of the Institute for Christian Conciliation, a division of Peacemaker® Ministries (complete text of the Rules is available at www.HisPeace.org).

TUBING, RIFLERY, ARCHERY CONSENT:

I/We, the parent or legal guardian of _____ (name of camper) and the named camper acknowledge that there are certain inherent risks associated with tubing and or space ball and that we accept the consequences of those inherent risks. Further, we understand that the named minor must observe and obey the camp rules pertaining thereto and agree not to act in a reckless manner while participating. I/We give our consent for the named minor to participate in the tubing and or space ball program of Florida Youth & Teen Grace Camp & Camp Horizon.

MY CHILD **DOES** HAVE PERMISSION TO USE ARCHERY RANGE [_____]

MY CHILD **DOES NOT** HAVE PERMISSION TO USE ARCHERY RANGE [_____]

MY CHILD **DOES** HAVE PERMISSION TO USE RIFLES [_____]

MY CHILD **DOES NOT** HAVE PERMISSION TO USE RIFLES [_____]

MY CHILD **DOES** HAVE PERMISSION TO TUBE [_____]

MY CHILD **DOES NOT** HAVE PERMISSION TO TUBE [_____]

Signature of PARENT/GUARDIAN _____ DATE _____
signifies agreement with the statements above and releases all liability of Florida Youth & Teen Grace Camp, Sponsoring Ministries, Involved Individuals and Camp Horizon.

Signature of CAMPER _____ DATE _____
means "I agree to follow Florida Youth & Teen Grace Camp & Camp Horizon's rules of behavior".

PLEASE ENSURE THAT BOTH PARENT/GUARDIAN & CAMPER SIGNS THE REGISTRATION FORM! Thank you kindly.