



Cornerstone Family Worship
Invite you!
CKC Camp 2024@ Camp Mt. Hermon
23801 Parallel Rd.
Tonganoxie, Ks 66086

This year we are excited to announce that CFW Leaders will be hosting a 3 day camp. June 6-7-8th, check in at 8am the 6th, pick up @ 4pm the 8th. Ages Kindergarten to 8th graders, \$30 per a child, discounts for multiples in family and scholarships available.

All in the great outdoors, you can choose to send kids for the night or pick them up each day. We know some kiddos don't like to spend the night away from home. We have limited cabins for boys/girls and we offer tents for the boys so far, who want to sleep outdoors. Invite your friends.

What to expect: learning about what God has for us, games, waterslide, (wet)giant slide,camp fires, worship, good food, great outdoors, bugs, dirt, hiking and a lot more.

Register online or pick up your packet at Cornerstone Family Church. As said we have limited space so sign up quickly and reserve your spot. If you have any questions please feel free to call/email Kelli Morris-913-620-9916/
Kelli@cfwchurch.com.

Cut off date is June 2nd no exceptions.

Camper/s Information

Camper/s Name: _____

Date of Birth: _____ Current Grade in school: _____

Address, City, State _____

Phone: _____ T-shirt size: _____

Parent/Guardian Information

Mom name: _____

Address(if different from above) _____

Phone: _____

Email: _____

Dad name: _____

Address(if different from above) _____

Phone: _____

Email: _____

Emergency contact

Name: _____

Relationship to camper: _____

Phone: _____

Email: _____

Reservation

Camper will come only during the day: _____

Cabin: _____

Sleeping in tent:(boys) _____

Transportation

Parent/Guardian authorized to pick up camper:

If needed whom is **NOT** authorized to pick up camper:

Health Information

Doctor's Name: _____

Phone: _____

Preferred Hospital: _____

Past history of serious injuries or illnesses we should know: _____

Taking any prescription: _____

Allergies/Reaction

To Drugs: _____

To food: _____

Special dietary requirements _____

Other: _____

Over the counter medications **NOT** permitted: _____

Authorization For Emergency Medical Care

By signing below, I hereby give my permission to Cornerstone Family Worship officials to call a doctor or emergency medical service, and for the doctor or medical service to provide emergency medical or surgical care for my child(ren) should an emergency arise. It is understood that Cornerstone Family officials will make a conscientious effort to locate the emergency contact, Parents/Guardian listed on camp registration form, before any action is taken. If it is not possible to locate emergency contact, Parents/Guardian listed, I/we Cornerstone officials accept responsibility to seek emergency medical or surgical treatment per doctor's order until emergency contact, Parent/guardian are contacted or arrive.

Sign _____ Date _____

Release, Waiver and Indemnity Agreement

It is the intention of _____ (parent or guardian) by this agreement to Exempt and relieve Cornerstone Family Worship and Camp Mt. Hermon and it's officer, agents, servants or employees from liability for personal injury, property damage, or wrongful death of _____ (name of minor) caused by any act of negligence of Cornerstone Family Worship and Camp Mt. Hermon and its officers, agents, servants or employees.

For in and in consideration of permitting _____ (name of minor) to observe, or use any facility or equipment of Cornerstone Family Worship and/or Camp Mt. Hermon, or engage in and/or receive instruction in any activity or activity incidental thereto some of which may involve dangers and risk of bodily injury at Camp Mt Hermon facilities and/or Cornerstone Family Worship in the city of Tonganoxie, County of Leavenworth, and State of Kansas, beginning on the date of June 6, 2024 through June 8, 2024, the undersigned parent and or guardian of

_____ (name of minor): Hereby voluntarily and absolutely releases, discharges, waives, and relinquishes any and all loss or damages or actions or causes of action for personal injury, property damage, or wrongful death occurring to _____ (name of minor) as a result of

_____ 's (name of minor) observing or using facilities or equipment of Camp Mt. Hermon and/or Cornerstone Family Worship, or engaging in or receiving instructions in any activities some of which may involve dangers and risk of bodily injury or in activities incidental thereto wherever or instructions may continue.

The undersigned parent or guardian of _____ (name of minor) for him/herself, his/her heirs, executors, administrators, or assigns agrees that in the event any claim for personal injury, property, damage or wrongful death shall be prosecuted against Cornerstone Family Worship and/or Camp Mt. Hermon or its officers, agents, servants or employees, the undersigned parent or guardian will indemnify and hold harmless Cornerstone Family Worship and /or Camp Mt. hermon and it's officers, agents, servants or employees from any and all claims or causes of action by _____ (name of minor) or by any other person or entity, by whomever or wherever made or presented, and under no circumstances will the undersigned parent or guardian of _____ (name of minor)

present any claim against Cornerstone Family Worship and/or Camp Mt Hermon and said persons for personal injuries, property damage, wrongful, or otherwise, caused by any act of negligence by Cornerstone Family Worship and/or Camp Mt. Hermon and said persons.

Parent or Guardian Initials _____

The undersigned parent or guardian represent that he/she has read this release, has requested and has been provided with, or has requested and decided advisement on the potential dangers/risks associated of engaging in the observation, activities, or instruction offered, assumes all risks associated with such dangers and risks, and is fully aware of and understand the terms and legal consequences of the signed of this release. The undersigned parent or legal guardian intends his or her signature to be a complete and unconditional release of all liability to the greatest extent allowed by law and if any portion of the release is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Dated: _____

Name of Minor _____

Signature of Parent or Guardian: _____

Printed name of parent or guardian: _____

WHAT TO BRING:

Bible/journal or small notebook

Pen/pencil

Sleeping bag/bedding for twin & pillow

2 towels (1 for water activities)

Soap/shampoo/hygiene products

Toothbrush/toothpaste

Casual/recreational clothing/socks

Jacket/sweatshirt

Raincoat/poncho

Modest swimsuit/cover up/water shoes

Tennis/athletic shoes only/shoes have to cover entire foot

Sunscreen & insect repellent

Flashlight

Medications in original containers with direction

Small amount of money for our ministry offering

Forms: registration/copy of insurance card(if registered online we will make a copy of the signed form) we will need a copy of insurance card.

If you are unsure about whether to bring an item, Please feel free to contact Kelli Morris, 913-620-9916. All of our adult leaders will have phones, if your child needs to contact you. If you need to contact us, here is a list of numbers and email.

Kelli Morris- CFW Leader-[913-620-9916](tel:913-620-9916)-Kelli@cfwchurch.com

Lynnette Abbott-Camp Mt. Hermon Leader- 913-845-2586,

Labbottcampmounthermon@gmail.com

WHAT NOT TO BRING:

Cell phones(for any reason)

Candy/food

Knives

Any kind of electronic (ipad,radio stereo,games, cd/cd player

Tobacco, drugs and alcohol

Attitudes 😊

No flip flop