

CAMP BANDINA/WALDRUM SESSION
JUNE 20 -26, 2021
MINIMUM STANDARD HEALTH PROTOCOLS

Parents and campers, in order for the Camp Bandina facility to open for business this summer the Board of Directors of Bandina Christian Youth Camp, Inc., have set some guidelines, along with State mandates. Please read these carefully and understand we must to the best of our ability abide by each of these. Our most important obligation is to keep your child/children as safe as possible and next is to love them, as we spend a week together in a Christian atmosphere where youth meets God.

- Upon arrival at the camp, check in will not begin until 2:00 p.m. NO EARLY REGISTRATION
- Social distancing will be mandated during check in and temperature will be taken. We Encourage only one parent to assist camper with check in
- Visitors will not be allowed in cabins only campers and counselors
- No visitors will be allowed on the camp facility during the week. Regretfully, we will not be able to have visitors on Friday afternoon or for the evening meal
- Masks will be required where social distancing is not possible, except while in cabins where only cohorts are together, and during outside activities
- Arts and Crafts will be following social distancing and some will be outside
- Singing and worship will be held in the amphitheater
- Counselors will be checking temperature of campers in their individual cabins morning and night, and monitoring possible camper symptoms
- Each day the cabins will be disinfected
- If a camper should have a temperature or become ill during the week, will be quarantined with nurse supervision and parent will be notified immediately
- Staff has been encouraged to get the vaccination before serving and will also be required to adhere to safety health protocols
- Pickup will be different! Please make arrangements to pick up your child no later than 9 a.m. Saturday, June 26, 2021 at the cabin they are assigned. We **will not** have the usual farewell devotional
- Campers need to be sure to bring masks

Please know this is not our NORMAL for the camp session and please understand we are only trying to prevent serious illness and the spread of the COVID pandemic.

CAMP MAY LOOK DIFFERENT IN 2021, BUT AT LEAST WE ARE TOGETHER ON THE HILL!!!

Application for Admission to Camp Bandina Waldrum Session

June 20 – June 26, 2021

Charles Williams, Director 512-756-0195 Sandy Wilson, Secretary 361-701-5847 FAX 361-664-8328

campbandina@hotmail.com

Ages 10 (by 9/1/2021) through 18 (graduating class 2021)

DEADLINE TO REGISTER – JUNE 16, 2021

		Male/Female
Last name _____	First name _____	(Circle one)
Mailing address _____		
City _____	State _____	Zip _____
Phone (_____) _____	Birth date (MM/DD/YY) _____	
Church preference _____	Member? ____ Yes ____ No	

Cost is \$155.00. You may send a deposit of \$75.00 now and pay the remaining \$80.00 when you arrive at camp. You may prefer to pay the total cost now. No refunds will be issued after June 13th I agree to abide by rules and regulations of Bandina Christian Youth Camp. Your signature below authorizes pictures of your child to be taken during camp activities and made available online.

Parent's email address (please print) Signature of Parent or Guardian

Your receipt will be emailed to the email address provided.

Camp theme t-shirts are available. If you would like to purchase a t-shirt, please circle your size and include payment now. **All t-shirts must be paid for in advance.** T-shirts will be distributed when you sign in at camp. **Please order by June 6th** We cannot guarantee shirts for campers who order after this date. We only order enough t-shirts for those who pre-order.
You are not required to order a t-shirt.

Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult X-Large -
Adult XX-Large Adult XXX-Large - \$12.00

DUE TO COVID-19 PANDEMIC, CAMPERS WILL NEED MASKS FOR SOME ACTIVITIES!!!

We look forward to seeing you on June 20, 2021!

Please enclose Application, Nurse Form, and payment as noted below.
Nurse Form must be submitted to enroll.

_____ Deposit of \$75.00 or full fee of \$155.00 (We do not accept credit cards.)

+ _____ T-shirt cost \$12.00

\$ _____ Total enclosed **Make checks payable to Camp Bandina – Waldrum Session**
1801 Olmos Ave.
Alice, TX 78332

Camp Bandina - Waldrum Session
NURSE INFORMATION FORM – 2021

_____ Date of Birth _____
Last name First name

Address _____
Street or Route Number City State Zip Code

Parent or Guardian's Name _____

Address of Parent or Guardian _____ Phone: _____ Home
_____ Cell _____ Work

1. Do you have any medication or food allergies? _____
If yes, what: _____ Type of reaction? (ie: rash/difficulty breathing?) _____

2. Past Medical History (Camper Only): Please answer yes or no to each. If yes, explain on back.

- a. Heart problems _____
- b. Kidney or bladder problems _____
- c. Lung (ie: asthma, etc) _____
- d. Neurological or mental _____
- e. Diabetes or thyroid _____
- f. Stomach/intestine/liver _____
- g. Other _____

3. Have you had surgery within the last year? _____ If yes, describe on back.

4. Do you have special medicine with you? _____ If yes, please list all prescription and non-prescription medications you will bring to camp. **Note: All meds, must be in original containers. All prescription medications must have original pharmacy label on container with camper's name in order to be dispensed at camp. List daily and as needed medications your child will/may take at camp.**

Name of med.	Strength(mg)	Time to be taken	Reason for med.
(1.) _____	_____	_____	_____
(2.) _____	_____	_____	_____
(3.) _____	_____	_____	_____
(4.) _____	_____	_____	_____
(5.) _____	_____	_____	_____
(6.) _____	_____	_____	_____

ALL MEDICATIONS MUST BE IN ORIGINAL CONTAINER WITH THE CAMPER'S NAME ON THE LABEL IN ORDER TO BE DISPENSED AT CAMP.

5. Have you had a tetanus shot within the last six months? _____

6. Have you had or been immunized for: Measles _____ Mumps _____ Rubella _____ Chicken Pox _____

Diphtheria _____ Whooping Cough _____ Other _____

I/We hereby give permission for the director and/or camp nursing staff to take _____ to the hospital or to see a health care provider in case of accident or sickness and to receive medical treatment as prescribed by the health care provider. I/we also acknowledge an understanding that camper health information may need to be shared with camp staff to ensure a safe camp experience. Confidentiality of camper health information is an important aspect of providing camp health care, along with keeping camp staff informed of camper needs. I/we understand the youth camp will not be held responsible for this camper and I/we will never bring any legal action against Bandina Christian Youth Camp, Inc.

Signed: _____ Date: _____

I/we give permission for _____ to swim while at camp. In case of an accident I/we give authority and consent for medical and surgical treatment as needed in the judgment of treating health care providers. I/we also agree that Bandina Christian Youth Camp, Inc. and its staff members will not be held responsible in the case of accident. I/we will never bring legal action against Bandina Christian Youth Camp, Inc.

Signed: _____ Date: _____

Please return with your camp application. Nurse form must be turned in to enroll.

BANDINA CHRISTIAN YOUTH CAMP, INC.

CAMPER AND STAFF CONSENT AND RELEASE FORM

DATES OF CAMP SESSION June 20 - June 26, 2021

COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 extremely contagious and is believed to spread mainly from person to person contact. As a result, federal, state and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Bandina Christian Youth Camp, Inc. cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending camp could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending camp and that such exposure or (not of) infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at camp may result from the actions, omissions or negligence of myself and others, including, but not limited to, Bandina Christian Youth Camp, Inc. employees, camp participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness damage, loss, claim, liability or expense of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at Bandina Christian Youth Camp, Inc., or participation in camp ("Claims"). On my behalf, and on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and hold harmless the camp, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions or negligence of Bandina Christian Youth Camp, Inc., its employees, staff, volunteers agents, and representatives, whether a COVID-19 infection occurs before, during or after participation in any camp program.

PRINT CAMPER NAME

SIGNATURE OF PARENT/GUARDIAN DATE

PRINT CAMPER NAME

18 YEAR OF AGE CAMPER SIGNATURE DATE

PRINT CAMPER NAME

STAFF MEMBER SIGNATURE DATE

PRINT CAMPER NAME