

**YOUTH APPLICATION**  
**SEA CITY WORK CAMP**  
**CORPUS CHRISTI, TEXAS**

**Registration Note:**

Deadline: Completed applications with the deposit attached will be accepted starting December 1, 2009

Each participating church **MUST** send 1 adult with every 4 youth registered. Eligible youth must be in grades 9-12 (or Spring 2010 graduates), based on Fall 2009 standings.

**CHECK THE WEEK YOU PLAN TO ATTEND:**

\_\_\_\_\_ June 6-11, 2010  
(First United Methodist Church, Portland)

\_\_\_\_\_ June 13-18, 2010  
(Grace United Methodist Church)

**REGISTRATION INFORMATION**

Name \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Church Membership \_\_\_\_\_

Birth Date \_\_\_\_\_ Age \_\_\_\_\_ Current Grade \_\_\_\_\_

E-mail address \_\_\_\_\_

**T-shirt Size: (circle one) XS S M L XL 2XL 3XL**

**MEDICAL INFORMATION**

1. Is there evidence or history of chronic infection of nose, throat, ears, sinus, lungs? If so, what?  
\_\_\_\_\_

2. Have you had an appendectomy? \_\_\_\_\_

3. Has there been recent exposure to a contagious disease? If so, what? \_\_\_\_\_

4. Indicate any recent illness and/or surgery \_\_\_\_\_

5. Are you subject to:  
\_\_\_ fainting \_\_\_ convulsions \_\_\_ sleep walking \_\_\_ asthma \_\_\_ hay fever \_\_\_ overheating

6. List inoculations that are still active \_\_\_ Tetanus \_\_\_ Polio \_\_\_ Others

**Date of Last Tetanus** \_\_\_\_\_

7. List all allergies, such as: \_\_\_ Penicillin \_\_\_ Sulfa \_\_\_ Insect stings \_\_\_ Drugs  
Others (list) \_\_\_\_\_

Food Allergies (list) \_\_\_\_\_

8. Are you on routine medication? \_\_\_ No \_\_\_ Yes If yes, name drug, dosage, and instructions:  
\_\_\_\_\_

9. List any diet restrictions \_\_\_\_\_

10. Are there any restrictions or special needs be observed during work camp? (If so, explain)  
\_\_\_\_\_

11. Family Physician \_\_\_\_\_ Office Phone \_\_\_\_\_

12. Person to notify in case of emergency:  
Name \_\_\_\_\_ Relation \_\_\_\_\_

Phone: (work) \_\_\_\_\_ (home) \_\_\_\_\_ (cell/pager) \_\_\_\_\_

Parent's email address: \_\_\_\_\_

Received by Registrar \_\_\_\_\_ Confirmation Sent \_\_\_\_\_ Balance Paid On \_\_\_\_\_



**PLEASE UNDERSTAND THAT YOU ARE ASKED TO MAKE A COMMITMENT TO COME TO SEA CITY WORK CAMP FOR THE ENTIRE WEEK FOR WHICH YOU REGISTER, AND THAT YOU ARE EXPECTED TO ATTEND ALL ACTIVITIES, BOTH DURING THE DAY AND AT NIGHT.**

### **COVENANT OF CONDUCT FOR SEA CITY WORK CAMP**

As Christian people and representatives of participating churches, we commit ourselves to uphold certain moral standards of behavior. These include:

1. Anything considered illegal for minors under civil and criminal law in Texas is illegal to bring to Sea City Work Camp. This would include tobacco use, alcohol consumption, and possession of firearms, weapons, or fireworks.
2. Visitation between males and females in dorm rooms is prohibited, except with supervision by the group's responsible adult or Camp Staff.
3. All participants are expected to be in designated places at all times, and to have a cooperative attitude.
4. All participants are expected to respect the host church, the property of other campers, the homes and belongings where work is being done, as well as the designated work camp neighborhood.
5. Any damage to the host church will be the sole responsibility of the person or persons who cause the damage, and the corresponding responsible adult(s).
6. Quiet time begins one half-hour following the close of the last organized activity, and continues until 6:00 a.m. the following morning. All participants in Sea City Work Camp are expected to be in their rooms during quiet time and to be respectful of others so that all may get plenty of rest.
7. No outside visitors allowed on the work site or at the host church except parents of campers.
8. Attire should be representative of the "church" at all times. Please dress respectfully!!!
9. Any camper leaving camp for any reason; **MUST** notify Camp Director & must be picked up by a parent or legal guardian. **DO NOT BRING YOUR CAR TO CAMP.**
10. Personal Cell phones will **NOT** be allowed on work sites, during worship or during organized activities. If the cell phone is taken up it will not be returned until close of camp.

### **RELEASE OF LIABILITY**

I understand that the Sea City Work Camp, a housing rehabilitation project, is physically demanding. I recognize the risk of injury by participating in this event. I understand that I must assume the risk of injury and any related financial responsibility that could result from participating in these activities. I release the Corpus Christi District Office of the United Methodist Church, The Most Rev. Edmond Carmody, D.D., Bishop of Corpus Christi, a Corporate Sole His Successors in office and St. Thomas the Apostle Catholic Church, the participating churches, staff members, directors, and volunteers from all liability for any injury occurring while participating in any activities held during the Sea City Work Camp.

***I have read and agree to abide by the  
Sea City Work Camp Covenant as stated above.***

***AND***

***I have read and understand the Release of Liability.***

**Date:\_\_\_\_\_ Participant's Signature:\_\_\_\_\_**

**Parent or Guardian Signature:\_\_\_\_\_**

**PERMISSION GRANTED TO:**

RELEASE PHONE NUMBER FOR CAMP ROSTER  
YES NO

RELEASE ADDRESS FOR CAMP ROSTER (INCLUDES E-MAIL ADDRESS)  
YES NO

**NOTE: IF ANY OF THE ABOVE TWO STATEMENTS ARE NOT MARKED "NO",  
YES WILL BE ASSUMED!**

Sea City Work Camp may use selected photographs taken during camp for promotional use. These photographs may include your child in camp related activities.

Date: \_\_\_\_\_ Participant's Signature: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

\_\_\_\_\_ Please check here if you would like information on available financial assistance.

**Pastor/Youth Director's Signature** \_\_\_\_\_

**NOTE: YOU WILL NOT BE CONSIDERED OFFICIALLY REGISTERED UNLESS APPLICATION IS RECEIVED WITH THE ABOVE SIGNATURE!**

**Helpful Comments Concerning Camper:** \_\_\_\_\_

(To be filled out by Youth Director or Pastor)

\_\_\_\_\_  
\_\_\_\_\_