

**OFFICIAL REGISTRATION FORM - 2019
 STATEWIDE HAITIAN YOUTH CAMP**
 Please print and return completed form

IMPORTANT: THIS FORM MUST BE COMPLETED AND SIGNED BY THE CHURCH/GROUP LEADER, AND BE NOTARIZED!

Name: STATEWIDE HAITIAN YOUTH CAMP **Age Group:** 13-18 Years Old and are still in High School
Date: Friday, June 21st to Monday, June 24th, 2019 **Location:** Lake Yale Baptist Conference Center
 Check-in will begin at 3:00pm on Friday, June 21st, 2019. Every student **MUST** be registered and are within the appropriate age group!

Participation Fees: (Includes FREE Lodging, Meals, Program, Camp T-shirt, and Indoor/Outdoor Activities).
 ***Registration: \$175.00/Person, if registered BEFORE MAY 20th, AND \$195.00/Person, if registered AFTER MAY 20th.
 *** Registration will be accepted until, **June 3rd, 2019, depending on availability. (Register early as place is limited).**
 Registration will NOT be accepted at "Lake Yale". You may register online at www.flbaptist.org or simply fill out this application and mail it along with your payment to the provided Convention address below.

Group Leader
 Last Name: _____ First Name: _____
 Address: _____ City: _____ Zip Code: _____
 Phone: _____ Email: _____

Church Information
 Church Name (No abbreviations): _____
 Church Address (Include City/Zip): _____
 Senior Pastor's Name (Last, First): _____
 Pastor's Contact Information: _____

Counselors:
 Each church is required to send **ONE Adult Counselor** for every group of 6 students (Male counselor for male students and female counselor for female students). Counselors **MUST** be at least 21 Years Old and complete the **REQUIRED Level 2 Background Screening**.
A complete package including the Affidavit of Good Moral Character, Background Screen Request Form, and Privacy Policy Acknowledgement Form will be sent out to your church by April 15th, 2019. Each counselor must complete and return all 3 forms along with a copy of their Florida State ID by May 13th, 2019 in order to be eligible.

Student's Information: *(Please use the other side of this form to provide the list of all students along with their assigned counselors).*
 EACH STUDENT IS ALSO REQUIRED TO HAVE A COMPLETED AND SIGNED COPY OF THE CAMP RELEASE FORM/CAMP RULES AND REGULATIONS.

Total number of people attending: _____ (#Adult Counselors: _____ #Students: _____) Total Cost: \$ _____

PAYMENT INFORMATION:
 Please make all CHECKS payable to **FLORIDA BAPTIST CONVENTION** and send payment along with all completed forms and documents to:
140 EAST 7TH STREET, HIALEAH, FL 33010 or email to Donatha Norde at dnorde@flbaptist.org.

If you wish to pay using credit cards, please complete the information below:
 Cardholder's Name: _____ Circle one: VISA - MasterCard - Discover
 Cardholder's Billing address: _____ City _____ State _____ Zip Code _____
 Credit Card Number: _____ - _____ - _____ - _____ Exp. Date _____ Security Code _____

Cancellation: *If unable to attend this event for any reasons and wish to cancel after having registered, a WRITTEN request must be submitted to Donatha Norde at dnorde@flbaptist.org at least two weeks prior to the event for reimbursement.*

I, _____, the group leader, have reviewed and confirmed that all forms and documents submitted for each student in my group are properly filled out and signed. I also take full responsibility for the safety and security of each student in my group during CAMP.

Group Leader's Signature: _____ **Date:** _____

Pastor's Signature: _____ **Date:** _____

Notary Acknowledgement: State of _____ County of _____ On _____
 before me, _____, Notary Public, personally appeared _____ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
 I certify under PENALTY OF PERJURY under the laws of the state that the foregoing paragraph is true and correct.
 WITNESS my hand and official seal.

Notary signature: _____ My commission expires: _____

LIST OF STUDENTS WITH ASSIGNED COUNSELORS

Please provide the names of all students along with their appropriate adult counselors. One female counselor is required for every 6 female students, and one male counselor is required for every 6 male students. Register early as rooms are limited!

FEMALE COUNSELORS WITH FEMALE STUDENTS

Female Counselor 1

Last Name: _____

First Name: _____

Birthdate (Month/Day/Year): ____/____/____ Age: ____ Sex: ____

Background Check: Yes No Date Completed: ____/____/____

Female Counselor 2

Last Name: _____

First Name: _____

Birthdate (Month/Day/Year): ____/____/____ Age: ____ Sex: ____

Background Check: Yes No Date Completed: ____/____/____

List of Female Students



Student1: _____ Age: ____

Student2: _____ Age: ____

Student3: _____ Age: ____

Student4: _____ Age: ____

Student5: _____ Age: ____

Student6: _____ Age: ____

Student7: _____ Age: ____

Student8: _____ Age: ____

Student9: _____ Age: ____

Student10: _____ Age: ____

Student11: _____ Age: ____

Student12: _____ Age: ____

Student13: _____ Age: ____

Note:

Please make sure to provide a completed and signed copy of the **CAMP Release Form** and the **CAMP RULES & REGULATIONS** for each student!

MALE COUNSELORS WITH MALE STUDENTS

Male Counselor 1

Last Name: _____

First Name: _____

Birthdate (Month/Day/Year): ____/____/____ Age: ____ Sex: ____

Background Check: Yes No Date Completed: ____/____/____

Male Counselor 2

Last Name: _____

First Name: _____

Birthdate (Month/Day/Year): ____/____/____ Age: ____ Sex: ____

Background Check: Yes No Date Completed: ____/____/____

List of Male Students



Student1: _____ Age: ____

Student2: _____ Age: ____

Student3: _____ Age: ____

Student4: _____ Age: ____

Student5: _____ Age: ____

Student6: _____ Age: ____

Student7: _____ Age: ____

Student8: _____ Age: ____

Student9: _____ Age: ____

Student10: _____ Age: ____

Student11: _____ Age: ____

Student12: _____ Age: ____

Student13: _____ Age: ____

Note:

Please make sure to provide a completed and signed copy of the **CAMP Release Form** and the **CAMP RULES & REGULATIONS** for each student!