

# Men-O-Lan Christian Camp & Retreat Center

## OVERNIGHT CAMP- WHAT TO BRING



### Please Bring

**Bible**  
**Notebook**  
**Pens/Pencils**  
**Informal clothes\***  
**Modest Swimsuit**

**Towels**  
**Laundry Bag**  
**Flashlight**  
**Insect Repellant**  
**Sunscreen**

**Sleeping Bag & Pillow**  
**Toiletries**  
**Sweater or Jacket**  
**Raincoat & Umbrella**

**Optional:**  
**Fishing Pole**  
**Camera**  
**Water Bottle**

\*Plan for 1 fancy dress-up dinner AND 1 clash-and-goofy night

Label all items brought to Camp. Men-O-Lan Christian Camp is not responsible for lost or stolen items.

#### **DRESS CODE:**

Staff and campers must observe a modest dress code at all times. Clothes that can get dirty are best to wear at camp. Many campers like to dress up for Friday Night's dress up dinner. Wear modest one-piece swimming suits (TWO-PIECE BATHING SUITS ARE NOT PERMITTED). Shorts should be suitable for recreation and not overly tight or short, at least mid-thigh in length. Shirts should be suitable for recreation and not be revealing, overly baggy or tight. Spaghetti strap tank tops, shirts that bare the midriff and/or show cleavage are NOT permitted. Clothing with wording or images contrary to the Christian principles, or wording of any kind across the back of shorts/pants may not be worn.

#### **RULES:**

Campers are responsible to protect and respect the environment and the camp facilities. This includes keeping the grounds litter-free and graffiti-free. Any and all property damage will be charged to the offending parties. Other rules set by Men-O-Lan Christian Camp Management shall be observed. Failure of any camper to observe the camp rules may result in expulsion.

#### **DON'T BRING:**

The following items are not permitted at camp: Cell Phones, CD/Tape players, iPOD/MP3 Players, Radios, Video Games, Laptop Computers, Tobacco, Lighters, Alcohol, Drugs, Nonprescription Medications, Knives, or Weapons of any kind. These items will be confiscated for the week if discovered in a camper's possession.

#### **VISITATION POLICY:**

To insure maximum safety and security, we do not permit parents and friends to visit during the camp week. Of course, please call with any emergencies or concerns, and feel free to drop off (at the office only) any important camper items left at home. For various reasons, campers are not permitted to have Cell Phones.

A Special Note to Parents: Camp Men-O-Lan provides an opportunity for young people to step out of the normal routines of life and into a unique camp environment of fun and spiritual growth. Our primary goal is to clearly present the Gospel to all campers and provide opportunities for them to make a commitment to Christ. Campers who are already committed to Christ are encouraged spiritually and challenged to grow in their faith. Many young people make their initial Christian commitment or experience significant spiritual growth during their time at camp.

We believe that it is beneficial for a camper's pastor to be informed if a camper experiences significant spiritual growth at camp. When we are aware of this, a letter is sent to the pastor of the home church to encourage follow-up ministry to the camper.

If you have any questions, please call us at 215-679-5144

## **OVERNIGHT CAMP PROCEDURES**

### **Camper Check-In & Pick-Up**

REGISTRATION IS HELD FROM 3.30-4.00PM. If you know that you will arrive after 4.00PM, you must contact the Camp Office one week prior to the arrival date so that special accommodations can be made.

PLEASE DO NOT go to cabin area until you have gone through registration.

LUGGAGE DROP OFF No more lugging luggage to the cabins! A luggage drop off area will be clearly marked, and our staff will deliver your camper's belongings to their cabin area.

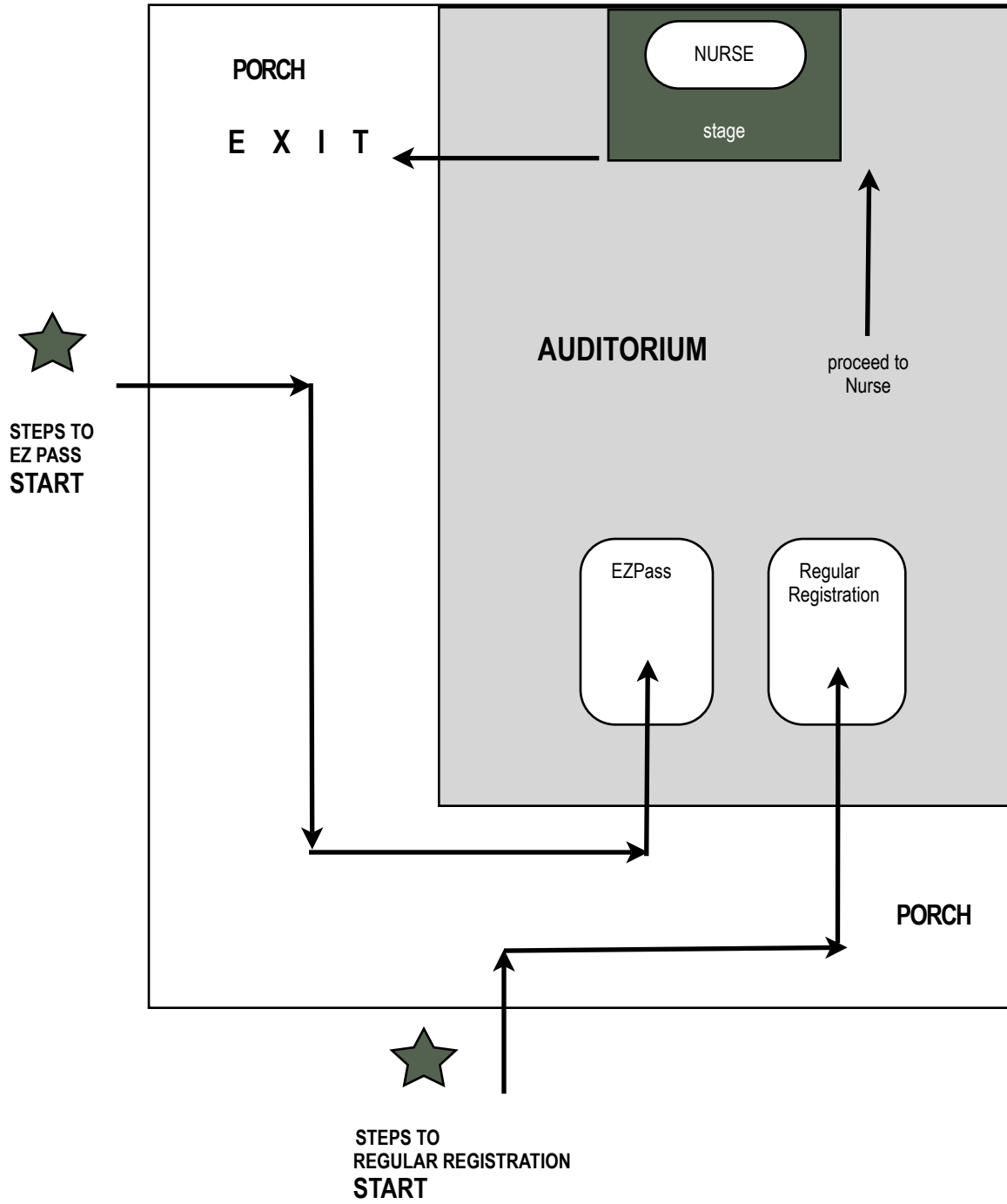
PLEASE LABEL ALL BELONGINGS including luggage, sleeping bag, pillows, fans, etc. with camper's first and last name.

EZPASS EZPass registration will be held in the Auditorium next to the 'regular' registration. This 'quick registration' process is available to campers who have paid in full AND completed AND returned all required paperwork ONE WEEK PRIOR TO THE START OF YOUR CAMP WEEK. There will be registration signs directing you to our Auditorium and two clearly marked lines for EZPASS and REGULAR registration. SEE MAP ON FOLLOWING PAGE.

MEDICATIONS Please bring any prescription or over the counter meds in its ORIGINAL CONTAINER. All meds must be given to the camp nurse. Prescription meds MUST be listed in your camper health form AND the PHYSICIAN'S AUTHORIZATION TO DISPENSE MEDICATION attached to your 'camper health form & activity release' MUST BE COMPLETED.

SECURITY MEASURES To increase the safety of campers and families, Men-O-Lan incorporates the following procedure: A STATE ISSUED FORM OF IDENTIFICATION (driver's license, etc.) will be required for camper pick up. You will be asked to show ID upon entering camp for camper pick up. Only vehicles carrying a person with proper identification AND indicated as an authorized person on the PARENTAL RELEASE FORM (attached) will be permitted to enter.

MEN-O-LAN REGISTRATION MAP



**Men-O-Lan Christian Camp & Retreat Center**  
Camper Health Form & Activity Release

Camp Activity Date (month/day(s)/year) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**GENERAL INFORMATION**

Last Name First Name M / F

**Parent/Guardian** Last Name First Name

Address

City State Zip

Phone (cell) ( ) Phone (home) ( )

Email

**Name of Insurance ID#**

**Name of Subscriber Group#**

**Emergency Contact** Last Name First Name

Phone (cell) Phone (home)

**HEALTH HISTORY**

Does the individual have special needs, or current medical condition(s) : y / n  
If y, please explain:

Does the individual have allergies, including food: y / n  
If y, please explain:

**MEDICATION HISTORY PLEASE SEE REVERSE SIDE FOR SPECIFIC PRESCRIPTION MEDICATION DIRECTIONS**

List any other health information that we should be aware of or which may affect campers ability to participate in any activity:

**IMMUNIZATION HISTORY**

Please circle the following vaccinations that are current & up-to-date: DPT POLIO OPV MMR

Please list the MONTH & YEAR of your child's last Tetanus Booster: \_\_\_\_\_ / \_\_\_\_\_

**This history is correct as far as I know. The camper listed above has permission to engage in all camp activities. In the event I cannot be reached in an emergency, I hereby give permission to Men-O-Lan and emergency services to transport, hospitalize, and secure proper treatment for my child named above.**

**I agree that I understand the risks of outdoor activities & camping life, and consent to the following: I shall not hold the camp or any of its representatives responsible or legally liable for losses of personal property or bodily injury; my child may participate in all camp activities; camp photographs/videos in which my child appears may be used in camp publicity, publications, and/or promotions.**

Parent/Guardian Signature Date

Parent/Guardian Printed Name

## Physician's Authorization to Dispense Medication

Due to state regulations, in order for any camper to receive prescription medication while attending Men-O-Lan, this form **must be completed, signed AND stamped by your prescribing physician:**

Camper Name \_\_\_\_\_

Medication (1) \_\_\_\_\_

Dosage \_\_\_\_\_  
Frequency \_\_\_\_\_  
Route \_\_\_\_\_  
Duration \_\_\_\_\_  
Adverse Rxns \_\_\_\_\_

Medication (2) \_\_\_\_\_

Dosage \_\_\_\_\_  
Frequency \_\_\_\_\_  
Route \_\_\_\_\_  
Duration \_\_\_\_\_  
Adverse Rxns \_\_\_\_\_

Specific condition when contact should be made with the physician

Prescribing Physician's Signature \_\_\_\_\_

Physician Stamp
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Office Tel. No. ( ) \_\_\_\_\_

Date \_\_\_\_\_

**Men-O-Lan Christian Camp & Retreat**  
Parental Release Form

Please note that for the security & safety of your child or children, the following form must be submitted to camp prior to your arrival. No exceptions will be made.

Your child or children will not be released to anyone who is not listed below. Parents/Guardians MUST INCLUDE THEMSELVES on this form. A state issued form of ID (e.g. driver's license) will be required for pick up on the day of departure. Your ID will be verified upon entrance into camp for pick up. Only vehicles carrying a person with proper ID and indicated as an authorized person on this form will be permitted to enter. Thank you for your cooperation in advance.

***The following child or children:***

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

***may be released to the following person(s):***

1. Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Tel. No. (     ) \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

2. Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Tel. No. (     ) \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

3. Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Tel. No. (     ) \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Parent/Guardian Print Name \_\_\_\_\_

Date \_\_\_\_\_