

2026 CCNC-N
Registration Guide
for
Summer Camps
at the
Community of the Great Commission

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WELCOME TO!

CGC CAMP 2026

Welcome again to family groups, silly games, crafts, and joyful sounds at CGC. This registration packet contains the information you need to make decisions and to plan and register for camp. We will eliminate all Covid-19 protocols this summer. If Covid-19 numbers, CDC guidelines, or California Public Health Department indicate that camp needs to take new precautions, we will inform all registrants and offer full refunds as desired.

- It is the strong preference of the Outdoor Ministry Committee and the Christian Church (DOC) of Northern California/Nevada Region, that, if possible and available to them, campers, the site staff and volunteer staff should be vaccinated prior to camp.
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- Please administer a Covid test the day of arrival at camp.
- If a camper or counselor shows symptoms of COVID during camp, that individual will be isolated with proper supervision, and a COVID test will be taken. If positive, parents/guardians will be called to take the camper home.
- Masks will be completely optional. This choice will be honored by all.

All registration will be online at ccncn.org/

We invite you to join in the excitement, pray for the success of camp 2026, and register for camp with great expectations.

Leanne Stump, Director of Outdoor Ministries, CCNC-N

Information on Camp Scholarships

The Region has been blessed to receive a generous bequest that will allow us to offer scholarships of up to 50% of the cost of camp. Partnerships among parents, congregations and the Christian Church of Northern California-Nevada will help ensure that any camper who wants to attend camp may be able to do so. Please see the scholarship request form at the end of this registration form to request the help that you might need.

LaTaunya Bynum, Regional Minister, CCNC-N

Summer Camp 2026

At the Community of the Great Commission (CGC)

- June 21 - June 25 Junior Camp (Completed 3rd, 4th, and 5th grades by June 2026)
- June 21 - June 27 Chi Rho Camp (Completed 6th, 7th, and 8th grades by June 2026)
- June 21 – June 27 CYF Camp (Completed 9th, 10^h, 11th and 12th grades by June 2026)
- June 27 – June 29 JOY Camp (Completed K, 1st, and 2nd grades by June 2026 and a Grandparent or other Adult Companion)

Invite a friend to register with you!

Congregational Camp Registrar Information
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Each congregation recruits a Congregational Camp Registrar who will:

1. Promote a CCNC-N Camp Awareness Month of April and note the Registration Due Date on Wednesday, May 27, 2026.
2. Encourage and help parents and campers to 1) complete online registration forms, 2) complete online Regional Camp Scholarship Form if needed, 3) complete online Waiver Form, and 4) understand the portion of camp registration costs that will be paid by the congregation, the region, and the registration balance due by campers before designated due dates.

MAY 27	DUE DATE for online registrations for Early Bird registration fee:
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	\$560 for Chi Rho and CYF and \$350 for Junior Camp
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	1. Complete online CGC Registration
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	2. Complete all online Regional Camp Scholarship requests – Scholarship requests will not be accepted after May 27.
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May 28-June 3 FINAL DUE DATE for all Community of the Great Commission Camps at (\$616 for Chi Rho & CYF and \$385 for Junior. No registrations will be accepted after this date!)

Work with the Pastor:

- To determine what amount of camp registration fee parents/campers owe
- To determine what amount the congregation will pay
- To determine whether a Regional Camp Scholarship is needed. Have parents (if a youth camper) or adult (if adult camper) fill out Regional Camp Scholarship form online.

The required accompanying Pastoral letters documenting financial need can be emailed to lataunya@ccncn.org or mailed to:

Christian Church of Northern California-Nevada
9260 Alcosta Blvd., Suite C-22
San Ramon, CA 94583-4143

3. Request from the church treasurer **ONE CHECK** for the congregational portion of all campers' fees. **Send check, Pastor signature page, and Registrar's Worksheet** to the Regional Office with **Attn: Camp Coordinator.**

4. Do a happy dance to be sending youth and adults to camp!!!



This section to be completed by your Pastor:

_____ I have read the covenant and am familiar with the CCNC-N policies and procedures. I affirm the efforts of the leaders to provide a safe camp experience and to create a positive Christian community. I expect the directors to communicate with me any serious violations of the covenant. I am satisfied that the campers from my congregation meet the age requirements of the camp, and I recommend that they be registered for the camp requested.

_____ I have included information that would be helpful in assisting the camp staff.

_____ **I have further information that would be helpful in assisting the camp staff, and I would like a phone call from the director.**

This information will be kept confidential.

Pastor's
Signature _____ Date _____

Pastor's Phone _____
Office Mobile

2026 Camp Information

For the following camps attendance for the whole week **IS** required of participants:
Invite a friend to register with you!

Community of the Great Commission

June 21 – June 25	Junior Camp (Completed 3 rd , 4 th , and 5 th grades by June 2026) Sunday 3:00 – Thursday 11:00
June 21 – June 27	Chi Rho Camp (Completed 6 th , 7 th , and 8 th grades by June 2026) Sunday 3:00 – Saturday 11:00
June 21 – June 27	CYF Camp (Completed 9 th , 10 ^h , 11 th and 12 th grades by June 2026) Sunday 3:00 – Saturday 11:00
June 27 – June 29	JOY (Formerly Grandparents & Me) (Completed K, 1 st , and 2 nd grades by June 2026 and Grandparent or other Adult Companion) Friday 2:00 – Sunday 11:30

**MAY 27 Due Date for CGC Online Registrations for the Early Bird Price:
\$560 registration fee for Chi Rho and CYF and \$350 for Junior Camp.**

1. Complete CGC Online Registration

2. **Online Regional Camp Scholarship requests** – Scholarship requests will not be accepted after May 27.

3. Print the registration confirmation and give to Congregational Camp Registrar at your church.

May 28-June 3 FINAL DUE DATE for all Youth Community of the Great Commission Camps for \$616 for Chi Rho & CYF and \$385 for Juniors registration fee.

(No registrations will be accepted after June 3.)

Information about Camp at the Community of the Great Commission

Keep this page to help you plan for camp.

At the Community of the Great Commission, campers enjoy swimming, hiking, crafts, games, fun activities, and campfires under the stars. Worship, singing, Bible study, group discussions, and time for personal devotion enrich campers' lives throughout the week. Compared to other camps, CGC is small. Our focus is on building relationships with each other and with God. Camp staff members are chosen for their spiritual maturity and their commitment to outdoor ministry. They are adults who are themselves on a faith journey, and their desire is to encourage others to grow in faith. For the safety of all children and youth campers, each adult counselor and director submits to a criminal background check. Additional forms and information about camp can be found on the regional church website at www.ccncn.org.

Location

CGC is located at 4,000 feet on the western slope of the Sierra Nevada Mountains, 25 miles east of Auburn. Although cooler than the Sacramento/San Joaquin Valleys, summer temperatures are still quite warm. Campers sleep in cabins that have wooden bunk beds with mattresses. In the Bobbitt area each cabin has a toilet and a shower. The summer cabins share a bath house. The camp has a beautiful swimming pool, trails for hiking, program buildings, athletic facilities and a dining hall.

Medical Care & Emergencies

Medical care is provided by a Camp Medical Supervisor who is an RN and/or certified in First Aid and CPR. The nearest hospital to camp is in Auburn. There is a doctor's office located in Forest Hill. In case of emergency there are paramedic units located in Foresthill, about seven miles away. All medical costs incurred during camp are to be paid by parents/guardians or adult campers if not covered by personal or camp insurance. The camp phones are for emergencies and camp business only. If there is an emergency and you need to contact someone at camp, the camp phone number is: **530-367-2370** (the camp business line). Claar is 539-367-2387 and Bobbitt is 530-367-2378 where you may reach an answering machine.

Mail at Camp

Campers (and counselors!) love to receive mail. Address letters and postcards to: Camper's Name, Name of Camp (**Adult, CYF, Chi Rho, Junior or JOY Camp** (Formerly Grandparents & Me Camp) Community of the Great Commission, 30303 Chicken Hawk Road, Foresthill, CA 95631. Please be sure your mail has the correct postage and is mailed before Wednesday in order to arrive at CGC by Friday. Remember, letters and postcards must be no smaller than 5 x 3 ½ inches. For items sent overnight or by FedEx, please sign the waiver so that it may be delivered without a signature. Do not send packages with food or other items inappropriate for camp (see below).

Arrival/Departure

The development of a special camp "community" begins the moment campers arrive at CGC. Campers who arrive late or leave early disrupt that development. All children and youth campers must arrive on time and stay through the end of camp.

Junior camps will begin on Sunday at 3:00 and end Thursday at 11:00am

Chi Rho camps will begin on Sunday at 3:00 and end Saturday at 11:00am

CYF camps begin Sunday with arrival at 3:00pm and no later than 5:00pm. Camp will end on Saturday at 11:00am.

JOY Camp (Formerly Grandparents and Me) begins Friday at 2:00pm and ends Sunday at 11:30am.

What to bring to camp

- ✓ Bible
- ✓ Sleeping bag (or sheets and blanket) & pillow
- ✓ Clothes (keep in mind the warm afternoons and cool nights at CGC as well as the red dirt!)
- ✓ Pajamas
- ✓ Appropriate swimwear
- ✓ Extra socks (they get dirty fast!)
- ✓ Long pants & long-sleeved shirt and sweatshirt or jacket for evenings
- ✓ Closed-toed shoes and water shoes for pool wear
- ✓ Water Bottle labeled with your name
- ✓ Sun block, hat
- ✓ Lip balm with sunscreen
- ✓ Small stick of antiperspirant (eases itch from mosquito bites)
- ✓ Insect Repellent
- ✓ Towel (for showers & swimming)
- ✓ Toiletries – soap in a container, shampoo, toothpaste, brush, etc.
- ✓ Flashlight
- ✓ Camera
- ✓ Letters to home kit (paper, envelopes, pen and stamps)
- ✓ Money for offering
- ✓ Prescription Medication in original containers with clearly readable name and dosage to be given to camp nurse
- ✓ Any other items indicated by the camp director in a director's letter sent out before camp begins
- ✓ **A note signed by your parent or guardian stating who will drive you to camp and who will drive you back home from camp**

Please **do not bring any food items, chewing gum, or valuables with you to camp.** Having food in the cabins will attract the animals that live at CGC. Cabins are for people, not bugs, raccoons, bears, or deer!

New Cell Phone Policy for Chi Rho and CYF Campers:

Phones will be collected at check in. Campers will have thirty minutes to an hour each day during free time to access their phones. We want our campers to be present at camp as much as possible, but also understand the realities of technology in our lives.

Junior Campers are asked to leave phones at home or the Directors will lock phones in a safe place for the week and return them at the end of camp. If your child or youth is homesick or having difficulties, one of the Directors will contact you to help resolve the situation.

Please do not bring any other electronic devices including computers, tablets, and game systems.

The Christian Church of Northern California-Nevada is not responsible for loss or theft of items or money brought to camp.

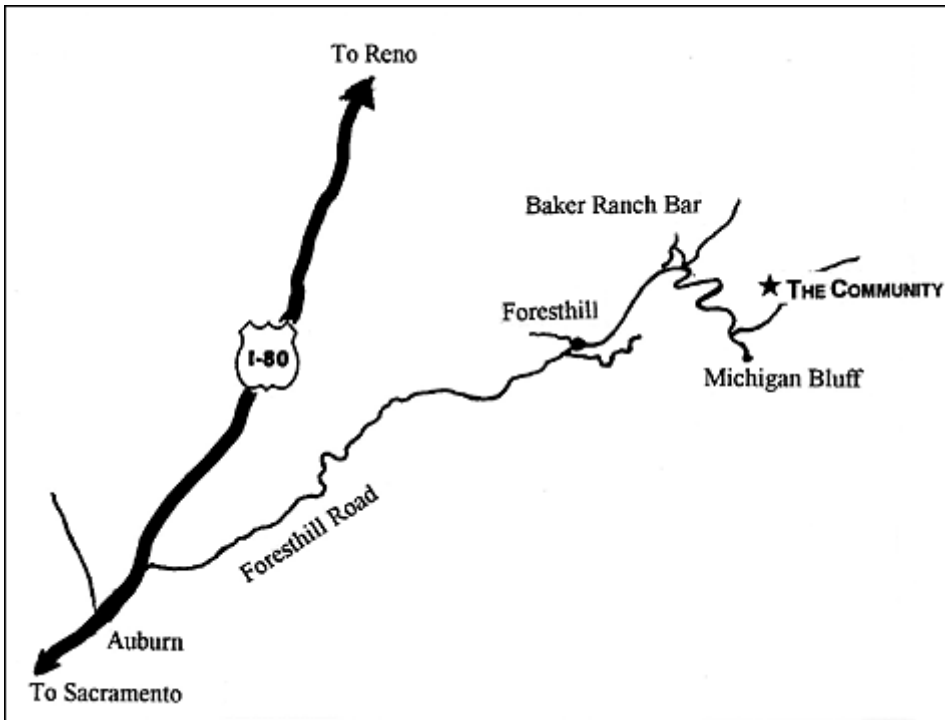
Cancellations/Refunds

For cancellations, call the regional office. A camper who cancels two weeks prior to the first day of camp will receive a refund of their camp fee, less a \$100 cancellation fee. **IF CANCELLING WITH LESS THAN 2 WEEKS NOTICE, CAMPER IS RESPONSIBLE FOR FULL PAYMENT.**

IF CANCELLING WITH COVID 19 CONCERNS OR ILLNESS, CAMPER WILL RECEIVE A FULL REFUND.

Directions to CGC

Take I-80 to Auburn. Just east of Auburn, take the Foresthill (Auburn Ravine Rd.) exit. Turn right, crossing the American River on California's highest bridge. Continue up the mountain through Foresthill. Approximately four miles past Foresthill, where you'll see the Baker Ranch Bar (on the left), turn right onto Michigan Bluff Road. Follow this steep winding road until you see the signs for the Community of the Great Commission. Travel times: from Auburn – 45 minutes, from Sacramento – 1.5 hours, from San Francisco – 3 hours, from Redding – 4 hours.



In the case that you might hear of fire or other emergency situation that would affect camp communities, please check at the www.UCCCR.org opening page at the bottom right “Current Conditions” for up to date information.

For more information:

Contact the regional office at 925-556-9900 or Jim Thomas, jim@ccncn.org.

Junior, Chi-Rho & CYF Child/Youth Registration

CCNC-N Summer Camp 2026 at the Community of the Great Commission

(All information is required)

Camper's name: first _____ middle _____ last _____

Parent/guardian name(s) _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Parent/guardian work phone _____ Parent/ Guardian Cell _____

Camper's email _____ Parent/guardian email _____

Age _____ Completed Grade _____ Gender: _____ Birth date _____

Church _____ City _____

The camp for which you are registering (check one):
 Junior (Entering grades 4, 5 and 6) June 21 – June 25
 Chi Rho (Entering grades 7, 8, and 9) June 21 – June 27
 CYF (Entering grades 10, 11, 12, and 2026 graduates) June 21 – June 27

Camp Fee \$560 Chi Rho and CYF \$350 Junior Camp (Prices Include Camp Photo)

Your child will receive an 8x10 camp photo before the end of camp and on which autographs of campers and staff can be collected.

CANCELLATIONS/ REFUNDS: For cancellations, call the regional office. A camper who cancels two weeks prior to the first day of camp will receive a refund of their camp fee, less a \$100 cancellation fee. **IF CANCELLING WITH LESS THAN 2 WEEKS NOTICE, CAMPER IS RESPONSIBLE FOR FULL PAYMENT.**

IF CANCELLING FOR COVID-19 CONCERNS OR ILLNESS, CAMPER WILL RECEIVE A FULL REFUND.

All registrations and payments are due online by May 27 for the Early Bird registration fee of \$560 Chi Rho and CYF Camp and \$350 Junior Camp.

Church registrars will postmark or deliver all congregational portions of camp fees by May 27 to the Regional Office. Registrations will be accepted Online from May 28 through June 3 for a registration fee of \$616 for Chi Rho & CYF and \$385 for Juniors. No registrations will be accepted after June 3. No scholarship requests will be accepted after May 27.

This section to be completed by Camper.

The best thing to happen to me recently: _____

The low point of the past twelve months: _____

I want to go to camp because: _____

Have you had any major changes in your life this year? (moved, new school, birth of brother/sister, parents' divorce, death of a loved one, etc.)

Camp Covenant

In order to help create an environment in which faith may be deepened and Christian community experienced, all youth and adults are asked to abide by this covenantal agreement...

For Summer 2026 as needed

I agree to abide by any and all special COVID Nonpharmaceutical Interventions (NPI) deemed appropriate by the Outdoor Ministries Committee during in-person camps. These will include but not be limited to wearing approved mask types, maintaining physical distances, frequent hand washing/sanitizing, smaller group and cabin sizes, being outdoors for most activities, providing optimum ventilation, as well as alternate bathroom and dining protocols as directed by camp Codirectors.

I agree to take care of the grounds and buildings of C.G.C.

I understand that I (or my parents) will be held financially responsible for any damages I cause.
I will not bring food or gum, as they attract and are harmful to wildlife.

I agree to take care of my fellow campers.

I will not use offensive language.
I will not engage in disrespectful, abusive or violent physical or verbal behavior toward others.
I will not bring weapons or fireworks to camp.
I will not enter any cabin other than my own.

I agree to take care of myself.

I will not bring or use illegal drugs or alcohol.
I will not bring or use tobacco products, E-cigarettes, or vapor cigarettes. *
I will bring and take all medications regularly taken for success in group learning situations.
I will check in all prescribed and over the counter medications and vitamins listed on my health form to the health supervisor upon arrival.
Any medications or vitamins brought to camp that are not listed on the health form must be signed in by a parent or guardian and checked in with the health supervisor upon arrival. Medications or vitamins found in the possession of a camper will be grounds for being sent home.
I will not engage in sexual behavior.
I will not hike alone.

I agree to help make camp the best it can be.

I will not bring valuables and will turn in to the director, ALL electronic equipment, including cell phones, MP3 players, i-pods, droids, etc.
I will use the phone only in case of emergency and with permission of the director.
I understand that visitors and pets are not permitted.

I understand that late arrivals and early departures are not permitted.

I will remain on site for the duration of camp and will participate fully in all camp activities, including meals.
If I drive to camp, I will turn in my keys to the camp director.

I have read and agree to abide by the Camp Covenant.
In addition, I certify that I am registering for the right camp for my grade level.
I understand that serious violation of this covenant may result in being sent home,
and I or my parents (whichever is applicable) will be responsible for transporting me home should that occur.

*Smoking: 1) is unhealthy, 2) interrupts camp community by isolating individuals, and 3) represents a serious fire danger at C.G.C. Therefore, the Outdoor Ministries committee has decided that all regional camps at CGC will be smoke-free for all campers and staff (regardless of age).

Camper's Covenantal Agreement

I have read and agree to abide by the Camp Covenant. I understand that serious violation of this covenant may result in my being sent home from camp.

- I have read and understand CCNC-N's Cyber Policy and I will seek to uphold the responsibilities and procedures outlined in this policy.
_____ (Initial)

Camper Signature _____ **Date** _____

This section to be completed by Parent/Guardian:

- I give my consent for my child _____ to attend and participate fully in Summer Camp 2026 at the Community of the Great Commission. I hereby voluntarily and absolutely release and discharge Christian Churches of Northern California and Nevada (hereinafter referred to as CCNC-N) and United Camps, Conferences and Retreats (hereinafter referred to as UCCR), its constituent organizations and their officers, agents, employees, including volunteers, from any and all loss or damages or actions or causes of action for personal injury, property damage, or wrongful death that my child may suffer as a result of his/her participation in the above-mentioned activity, including transportation to or from the event, or occurring by the use of facilities or equipment; whether or not such injuries or damages are caused by the negligence (active or passive) of any of the entities or individual named above.
- I agree to direct my child to cooperate and conform to the directions and instructions of personnel responsible for the activities. **I have read the camp covenant, and I understand that if my child violates the covenant, I will be responsible for my child's early transportation home.** _____ (Initial).
- I promise that I (or an emergency contact person) will be available by phone and in person in case of an urgent situation during the week of camp.
- I give my permission for the registrant to be photographed for educational/publicity purposes (with the possibility of the pictures being published on the Regional Website or Facebook page). I have read and understand CCNC-N's Cyber Policy and I will seek to uphold the responsibilities and procedures outlined in this policy. _____ (Initial)

Parent/Guardian signature:

_____ Date _____

Camper's Covenantal Agreement if 18 or older

- I agree to cooperate and conform to the directions and instructions of personnel responsible for the activities.
- **I have read and agree to abide by the Camp Covenant. I understand that violation of this covenant may result in my being sent home from camp and that I will be responsible for my early transportation home.** _____ (Initial)
- I agree to attend and participate fully in Summer Camp 2026 at the Community of the Great Commission. I hereby voluntarily and absolutely release and discharge Christian Churches of Northern California and Nevada (hereinafter referred to as CCNC-N) and United Camps, Conferences and Retreats (hereinafter referred to as UCCR), its constituent organizations and their officers, agents, employees, including volunteers, from any and all loss or damages or actions or causes of action for personal injury, property damage, or wrongful death that I may suffer as a result of my participation in the above-mentioned activity, including transportation to or from the event, or occurring by the use of facilities or equipment; whether or not such injuries or damages are caused by the negligence (active or passive) of any of the entities or individual named above.
- I give my permission to be photographed for educational/publicity purposes (with the possibility of the pictures being published on the Regional Website). I have read and understand CCNC-N's Cyber Policy and I will seek to uphold the responsibilities and procedures outlined in this policy. _____ (Initial)

Camper Signature:

_____ Date _____

Health Form for Child/Youth Camps

CCNC-N Summer Camp 2026 at the Community of the Great Commission

(All information is required)

Camper's Last Name _____ First Name _____ Middle Name _____

Camper's Address _____ City _____ State _____ Zip _____

Age _____ Date of birth _____ Gender _____ Camp (circle one): Junior Chi Rho CYF JOY(GP&M) Adult/Young Adult

The following information is required to ensure that your child's individual needs are met while attending camp. It is vitally important that you provide our camp Registered Nurse, EMT, and/or CPR trained camp medical care supervisor with the most accurate information with regard to your child's health issues including any Special Needs that your child has. Withholding information prevents our camp staff from ensuring that your child has the best week of summer camp ever. Information is confidential and will be made available only to those people who are directly responsible for your child's well-being. In the event of an emergency, every effort will be made to contact the parent/guardian. **No person will be allowed to attend camp without a completed and signed copy of this form. All medications must be listed including those for impulse control, behavior management and group learning situations providing enough to last through evening programming. Camp is not a time for a medication holiday.**

HEALTH HISTORY: Has your child been subject to any of the following? Please check all that apply.

	In past year	More than 1 year ago		In past year	More than 1 year ago
Diabetes			Hyperactivity		
Epilepsy			Convulsions		
Heart disease			Fainting spells		
Rheumatic fever			Tires easily		
Chicken pox			Nosebleeds		
Rubella			Eye/ear problems		
Mumps			Fractures		
Whooping cough			Muscle sprains		
Scarlet fever			Bed wetting		
Hepatitis			Depression		
Encephalitis			Other (specify)		
Emotional problems					

Does your child have any allergies? _____

Are immunizations up to date? _____ Date of last tetanus booster: _____ Date of last DPT booster: _____
(Tetanus booster should be within last 10 years.)

Date of last MMR _____

Usual source of care: Physician _____ Phone no. _____

Dentist _____ Phone no. _____

Eye Doctor _____ Phone no. _____

Glasses? _____ Contact Lenses? _____

Health Insurance Carrier and no.: _____

Is your child currently under care of a physician? _____ Counselor? _____ If yes, please give additional information: _____

(Health Form continued on next page)

Does your child have any special dietary needs? (Please specify food allergies, if vegetarian, etc.) _____

Is there additional information, which would be of help in promoting your child's welfare while at camp?

Does your child have special needs that require an IEP or 504 Plan? What is that need and can you attach a summary of the IEP?

_____ -
What are emotional and/or physical triggers for your child?

Please attach extra pages as needed to detail needs of your child and techniques and strategies to help them be successful at camp.

Are there activities your child should not participate in while at camp? Yes No If so, please explain _____

Will this be the first time your child has been away from home alone? Yes No

Transportation

Transportation will be provided from home to camp by:

(List all possibilities for drivers who have your permission to transport your child to camp.)

Transportation will be provided from camp to home by:

(List all possibilities for drivers who have your permission to transport your child from camp to home.)

As-needed Medications

If you **do not** wish to have your child treated using the following medications in the event of the presence of the symptoms indicated, please check the “No” column. If the treatment listed below is acceptable for the corresponding symptoms leave the column blank. These non-prescription drugs will be provided on an as needed basis. (Generic brands may be substituted for name brands listed here.) **Please send over the counter medication that is taken on a regular basis.**

Symptoms	Treatment	NO	Symptoms	Treatment	NO
Upper Abdominal Pain	Liquid Maalox (aluminum hydroxide)		Fever, Flu; Headache	Advil (ibuprofen) or Tylenol (acetaminophen)	
Nausea	Maalox (aluminum hydroxide)		Menstrual Cramps	Advil (ibuprofen) or Tylenol (acetaminophen)	
Allergy, Hives, Bites	Benadryl (diphenhydramine)		Muscle Spasm	Advil (ibuprofen) or Tylenol (acetaminophen)	
Constipation	Milk of Magnesia (magnesium hydroxide)		Poison	Activated Charcoal Poison Control Center will be called first	
Cough	Robitussin DM (dextromethorphan guaifenesin)		Rash	Cortaid Cream (hydrocortisone cream)	
Cuts	Hibacens and Polysporin (bacitracin polymyxin ointment)		Sinusitis	Sinutab (loratadine chlorpheniramine phenylephrine)	
Diarrhea	Imodium AD (loperamide)		Sore Throat	Throat Lozenge, (acetaminophen, ibuprofen)	
Earache	Auralgan (if not allergic to –caines), Sinutab, Afrin (benzocaine, antipyrine ointment) (oxymetazoline nasal spray)		Sunburn	Solar Caine (if not allergic to –caines) (Ibuprofen & lidocaine spray)	
Eye Irritation	Visine AC Tetrahydrozoline HCl eye drops		Vomiting	Pedialyte (oral fluid and electrolyte solution)	

Medications: Please provide and list amount and times for each prescription medication that your child takes on a regular basis. Please provide inhalers and adrenaline, epinephrine (EpiPen) and instructions on an as needed basis. Please provide any over the counter medication taken regularly. This information can be updated at any time or when your child arrives at camp. All medications must be in their original packaging and will be administered by the medical supervisor during camp only as prescribed by a doctor on the prescription bottle label. **All prescription and over the counter medicines, including vitamins, must be turned over to the camp medical care supervisor. All medications must be listed including those for impulse control, behavior management and group learning situations providing enough to last through evening programming. All listed medications must be taken. A camper keeping medication in their belongings in the cabin has chosen not to participate fully at camp and has chosen to go home. If a camper comes without the regular daily medication and causes disruption in community, it is grounds to be sent home. Camp is not a time for a medication holiday. Parents must sign for medications brought on the first day of camp that are not on this list.**

Medication	Dosage	Interval	Purpose

Medical Release Statement (MUST be signed)

My Child _____ **is in good health.** I will notify the camp director if my child is exposed to any communicable disease during the two weeks prior to attending camp.

In case of medical emergency, I give my permission to the physician selected by the Camp Director, Camp Medical Care Provider, or other authorized camp staff member to secure proper treatment for, hospitalize and order injection, anesthesia or surgery for my child/myself (if over 18). It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of our aforesaid agent(s), especially in case of emergency, to give specific consent to any such diagnosis, treatment, or hospital care which the aforementioned physician in the exercise of his or her judgment may deem advisable. I agree to pay for any medical, dental, surgical, or hospital diagnosis, treatment, or care rendered to my child/myself (if over 18).

Parent/Guardian Signature _____ Printed Name _____ Date _____

Phone Numbers: _____
 Home _____ Work _____ Mobile _____

Additional Parent/Guardian Phone: _____

Christian Church of Northern California/Nevada Region

The Community of the Great Commission Participant, Release, Indemnification of all Claims & Covenant Not To Sue

Minor Participant Name: _____
(Junior, Chi Rho, and CYF camp participants not accompanied by a parent or grandparent)

Family Name: _____
(JOY Camp participants)

NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. Read this document carefully and in entirety. By signing this agreement, you give up your right and/or any named minor's right to bring a court action to recover compensation or obtain any other remedy for any personal injury or property damage however caused arising out of your participation and/or the named minor's participation in the camping program of the Christian Church (Disciples of Christ) of Northern California/Nevada Region at the Community of the Great Commission.

ACKNOWLEDGMENT OF RISK

I, in my legal capacity as the parent/guardian of the minor named above, and/or as a participant myself, do hereby acknowledge and agree that participation in any activities comes with inherent risks. I have full knowledge and understanding of the inherent risks associated with any activity or program participation, including but in no way limited to: (1) slips, trips, and falls, (2) aquatic injuries, (3) athletic injuries, and (4) illness, including exposure to and infection with viruses or bacteria. I further acknowledge that the preceding list is not inclusive of all possible risks associated with any activity or program participation and that said list in no way limits the operation of this Agreement.

WAIVER, RELEASE, INDEMNIFICATION & COVENANT NOT TO SUE

In consideration of your participation and/or the named minor’s participation in the Christian Church (Disciples of Christ) of Northern California/Nevada Region at the Community of the Great Commission activities and programs, I am the parent/guardian of the minor named above, agree to release and on behalf of myself and/or the minor named above, my heirs, representatives, executors, administrators, and assigns, HEREBY DO RELEASE the Christian Church (Disciples of Christ) of Northern California/Nevada Region at the Community of the Great Commission, its officers, directors, employees, volunteers, agents, representatives and insurers (“Releasees”) from any causes of action, claims, or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I, the named minor, my heirs, representatives, executors, administrators and assigns may have, now or in the future, against the Christian Church (Disciples of Christ) of Northern California/Nevada Region at the Community of the Great Commission on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the use of facilities/equipment or participation in the Christian Church (Disciples of Christ) of Northern California/Nevada Region at the Community of the Great Commission programs whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Releasees.

In consideration of my participation and/or the named minor’s participation in activities and programs, I, the undersigned parent/guardian of the named minor, agree to INDEMNIFY AND HOLD HARMLESS Releasees from any and all causes of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way related to my program participation and/or the named minor’s activity and program participation.

I hereby certify on behalf of myself and/or the named minor that I have full knowledge of the nature and extent of the risks inherent in any activity and program participation and that I, and/or on behalf of myself and the named minor, am voluntarily assuming said risks. I understand that I and/or the named minor will be solely responsible for any loss or damage, including personal injury, property damage, or death, that I and/or the named minor sustains while participating in any activities and programs and that by signing this agreement I, on behalf of myself and/or the named minor, HEREBY RELEASE Releasees of all liability for such loss, damage, or death. I further certify that I and/or the named minor is in good health and has no conditions or impairments which would preclude my/his/her/their safe participation in any activities and programs.

I further certify I am therefore of lawful age (18 years or older) and otherwise legally competent to sign this agreement, and that I have legal capacity to act as the parent/guardian of the named minor. I further understand that the terms of this agreement are legally binding and certify that I am signing this agreement, after having carefully read it, of my own free will.

Minor Participant(s) Name(s): _____

Adult Participant(s) Name(s) (over age 18): _____

Date: _____

Parent/Guardian Signature: _____

Parent/Guardian Name (Print Clearly): _____

**JOY Camp
(Joining Older and Younger)
Adult and Child Registration**

CCNC-N Summer Camp June 27 at 2:00PM-June 29, 11:30 AM, 2026 at the Community of the Great Commission

*All information is required; Child may submit this registration online with the parents separately from accompanying adults.
Adults fill out the adult health form; parents of children fill out a child/youth health form.*

1st Adult Name: First _____ M.I. _____ Last _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email Address _____ Gender _____

Home Church _____ City _____

2nd Adult Name: First _____ M.I. _____ Last _____

Street Address _____ City _____ State _____ Zip _____

Email Address _____ Gender _____

Home Church _____ City _____

1st Child: First Name _____ M.I. _____ Last _____

Street Address _____ City _____ State _____ Zip _____

Home Church _____ City _____ Gender _____

This section to be completed by Parent/Guardian of child.

- I give my consent for _____ to attend and participate fully in JOY Camp 2026 at the Community of the Great Commission.
- I give my permission for my child to be photographed for educational or publicity reasons (with the possibility of the pictures being published on the Regional website).

Parent/Guardian signature _____ **Date** _____

2nd Child: First Name _____ M.I. _____ Last _____

Street Address _____ City _____ State _____ Zip _____

Home Church _____ City _____ Gender _____

This section to be completed by Parent/Guardian of child.

- I give my consent for _____ to attend and participate fully in JOY Camp 2026 at the Community of the Great Commission.
- I give my permission for my child to be photographed for educational or publicity reasons (with the possibility of the pictures being published on the Regional website).

Parent/Guardian signature _____ **Date** _____

**JOY Camp
(Joining Older and Younger)
Adult and Child Registration**

**June 27 at 2:00PM-June 29, 11:30 AM, 2026
at the Community of the Great Commission**

ACCOMMODATIONS for JOY Camp

There are four choices of accommodation.

- 1) Clear House: Twin beds (some in private rooms and some in shared rooms). Bathrooms are in room or down the hall.
- 2) Your own RV: 3 spaces available. One has water and electrical hook-up, one has electrical only, and one has no hook-ups.
- 3) Your own tent: Tent spaces are close to a bathhouse and campfire circle.
- 4) Holland Area Summer Cabins: 5 cabins with bunk beds and bathhouse access.

Reservations for all types of accommodation will be on a first come, first served basis. Register early!

All meals will be provided at the Irvin Dining Hall. Most special needs can be accommodated. Note yours on Health Forms!

CAMP COST: Fees cover two nights and five meals. Each price is per person.

Clear House	1 st Adult	\$180.00	_____
	2 nd Adult	180.00	_____
	1 st Child 6-9	114.00	_____
	2 nd Child 6-9	114.00	_____
	Child under 6	Free	

Holland Area Summer Cabins	1 st Adult	\$ 166.00	_____
	2 nd Adult	166.00	_____
	1 st Child 6-9	96.00	_____
	2 nd Child 6-9	96.00	_____
	Child under 6	Free	

RV or Tent	1 st Adult	\$ 136.00	_____
	2 nd Adult	136.00	_____
	1 st Child 6-9	88.00	_____
	2 nd Child 6-9	88.00	_____
	Child under 6	Free	

Sub-total _____

Total Cost _____

CANCELLATIONS/ REFUNDS: For cancellations, call the regional office. A camper who cancels two weeks prior to the first day of camp will receive a refund of their camp fee, less a \$100 cancellation fee. **IF CANCELLING WITH LESS THAN 2 WEEKS NOTICE, CAMPER IS RESPONSIBLE FOR FULL PAYMENT.**

Health Form for Adult/Young Adult Participants including JOY Camp

CCNC-N Summer Camp 2026 at the Community of the Great Commission

(All information is required)

Name First _____ Middle _____ Last _____

Address _____ City _____ State _____ Zip _____

Age _____ Date of birth _____ Gender _____

The following information is required to ensure that your individual needs are met while attending camp. Information is confidential and will be made available only to those people who are directly responsible for your well-being. In the event of an emergency, every effort will be made to reach the emergency contact. No person will be allowed to attend camp without a completed, signed copy of this form.

HEALTH HISTORY: Have you been subject to any of the following? Please check all that apply.

	In past year	More than 1 year ago		In past year	More than 1 year ago
Diabetes			Hyperactivity		
Epilepsy			Convulsions		
Heart disease			Fainting spells		
Rheumatic fever			Tires easily		
Chicken pox			Nosebleeds		
Rubella			Eye/ear problems		
Mumps			Fractures		
Whooping cough			Muscle sprains		
Scarlet fever			Depression		
Hepatitis			Other (specify)		
Encephalitis					
Emotional problems					

Do you have any allergies? _____

Are your immunizations up to date? _____ Date of last tetanus booster: _____ Date of last DPT booster: _____
(Last Tetanus booster should be within 10 years.)

Usual source of care: Physician _____ Phone no. _____

Dentist _____ Phone no. _____

Eye Doctor _____ Phone no. _____

Do you wear Glasses? _____ Contact Lenses? _____

Health Insurance Carrier and no.: _____

Are you currently under care of a physician? _____ Counselor? _____ If yes, please give additional information: _____

Do you have any special dietary needs? (Please specify food allergies, if vegetarian, etc.) _____

Is there additional information which would be of help in promoting your welfare while at camp? _____

Getting around at camp requires extensive walking on gravel roads and dirt trails. Due to the nature of this camp the use of walkers, crutches or wheelchairs is not appropriate. Some transportation by car is possible around the camp grounds.

Camp Scholarship Information

CCNC-N Summer Camp 2026 at the Community of the Great Commission

(All information is required)

The Christian Church of Northern California-Nevada is pleased to be able to offer scholarship assistance for children, youth and adults participating in our summer camp program. This is made possible by the Ben Bohren Scholarship Fund, the Galt Scholarship Fund, the San Lorenzo Scholarship Fund, and the Cal Underwood Camp Scholarship Endowment Fund.

- The Outdoor Ministries Committee recommends a 3-way division of payment for campers wishing financial assistance. If possible, the camper, the local congregation, and the region should each pay 1/3 to 1/2 of the total cost. Check with your pastor to find out if your church can contribute. Some churches will pay as much as 50-100%.
- The camper contribution includes the contribution from camper and parent/guardian, as well as the amount fundraised by the camper, which is highly encouraged.
- The local congregation contribution is the amount of scholarship freely given by the church.
- The balance requested from Regional Scholarship funds is the regional contribution.
- Maximum scholarship amount granted will be half of the cost of the camp fees for youth campers.
- Before filling out the scholarship application, please read the following information carefully, paying close attention to deadlines.
- The scholarship request must accompany the completed camp registration form.

Criteria for Scholarship Assistance

1) Applicants for scholarships must have demonstrated involvement in the local church.

2) A pastoral letter must accompany the application. If your church is currently without pastoral leadership, another leader such as Board Chair or Elder Chair will suffice.

The letter must include the following information that will remain *confidential*:

- Confirmation of the applicant's financial need (source of income, extenuating family circumstances, etc.)
- State whether your congregation will give scholarship assistance. If yes, please state how much.
- Confirm the youth's involvement in the local church.

Applications lacking any of the above information will not be considered.

Timeline for Process

*** Scholarship applications must be submitted with the online registration by May 27.**

* * Pastoral letters can be emailed to lataunya@ccncn.org or mailed to:

**Christian Church of Northern California-Nevada
9260 Alcosta Blvd., Suite C-22
San Ramon, CA 94583-4143**

No late applications will be considered. Applicants will receive notification by June 8 that will state the request that has been considered and the dollar amount of assistance given.

Camp Scholarship Application

CCNC-N Summer Camp 2026 at the Community of the Great Commission

(All information is required)

Application Due Date: May 27, 2026

Please be sure to read Camp Scholarship Information above before filling out this form.

Camper Information:

Camper's Name

Birth date (MM/DD/YY)

Street Address/City/State/Zip Code

Home Phone Number

Camp planning to attend (please circle):

JOY Junior Chi Rho CYF

Name of Local Congregation/City

Has the camper attended summer camp before? (please circle): Yes / No

If yes, please list camps attended: _____

Has the camper received a scholarship previously? (please circle): Yes / No How many times? _____

Will there be other children from your family attending the CCNCN Regional summer camp and conference program? (please circle):
Yes / No Will they be seeking scholarship assistance as well? Yes / No

If yes, how many children? _____ Which camps? _____

Parent/Guardian Information:

Name

Phone Number

Street Address/City/State/Zip Code (if different than above)

Occupation

Scholarship Information:

Individual contribution: \$ _____

Local church scholarship: \$ _____

Amount of scholarship you are requesting:
(up to 50%) \$ _____

Other sources of support for camp: \$ _____

Signature of Parent/Legal Guardian or Adult Camper

Date