

SEA CITY WORK CAMP ADULT APPLICATION

Registration Note:

Completed applications with the nonrefundable fee attached will be accepted starting **January 1, 2017** with a **cutoff date of April 29, 2017**
EACH PARTICIPATING CHURCH MUST SEND 1 ADULT WITH EVERY 4 YOUTH REGISTERED.

June 11 -16, 2017

**Grace United Methodist Church
Calallen**

REGISTRATION INFORMATION

Name _____ Male ___ Female ___ Occupation _____

Spouse's Name _____ Church Membership _____

Address _____ City _____ Zip _____

E-Mail Address: _____ Phone Home _____ Cell Phone _____

Date of Birth _____ T-shirt Size: (circle one) S M L XL 2XL 3XL

How many years have you participated in Sea City Work Camp? _____

General Construction on Worksite

(Volunteers with no previous experience are welcome!)

Specific Skills: I am skilled in the following areas: ___Painting___ ___Roofing___ ___Siding___ ___Woodwork___
I would prefer to work in the following areas during work camp: ___Painting___ ___Roofing___ ___Carpentry___

Note: All work will be at the discretion of by the Camp Director.

Availability: Circle all appropriate days: Sun Mon Tue Wed Thur Fri Sat All Week

_____ I can stay overnight as an adult chaperone.

_____ I can drive a van to transport campers during the day. **Must be at least 25 years of age to drive a SCWC vehicle.**

_____ I can drive a van to transport campers during the evening. **Must be at least 25 years of age to drive a SCWC vehicle.**

_____ I have completed AND attached all required paperwork to the **3rd** page of this application. I understand that my application will not be accepted until all paperwork is complete and that the cutoff date of April 29, 2017 is going to determine the number of worksites & campers that Sea City Work Camp will be able to commit to for the summer of 2017.

_____ I will use my cell phone during camp & know that my number will be listed on a camp phone roster.

PERMISSION GRANTED TO

RELEASE PHONE NUMBER FOR CAMP ROSTER
YES NO

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

RELEASE ANY & ALL PHOTOS TAKEN DURING CAMP FOR FUTURE PUBLICITY, GRANT REPORTS, FACEBOOK
YES NO

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

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, Sea City Work Camp, 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. ***I have read and understand the Release of Liability.*** I have completed this application with full honesty and I am liable to provide any information to the Camp Director in writing if there should be any changes to the camper's application by the time camp begins.

Participant's Signature: _____ **Date** _____

If Paying Online: Confirmation# _____ **Amount Paid** _____

Received by Registrar _____ Confirmation Sent _____ Balance Paid On _____

MEDICAL INFORMATION

FOR ADULT CAMPER NAME: _____

1. Is there evidence or history of Heart Problems or High Blood Pressure, chronic infection of nose, throat, ears, sinus, and 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:
_____ **high blood pressure** _____ **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) _____

In the judgment of any representative of the Sea City Work Camp, if I, the above-named participant, should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to me by any physician, hospital, or Sea City Work Camp representative.

SIGNED

Insurance Policy Number _____ Company _____

In the name of _____

Total cost of Sea City Work Camp 2017 is \$75.00 for adult participation.

Checks should be made payable to Sea City Work Camp.

**Fill out ALL 3 PAGES of this application form completely
and return with nonrefundable fees to:**

**Sea City Work Camp Registrar
P. O. Box 10449, Corpus Christi TX 78460**

ADULT PAPERWORK THAT IS NEEDED IN ORDER TO PARTICIPATE IN SEA CITY WORK CAMP AS AN ADULT CAMPER

_____ I have attached a copy of my current Driver's License.

_____ I have attached a copy of my current proof of Auto Insurance ID.

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, Sea City Work Camp, 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.

According to Texas Department of Human Services, anyone who works with youth under 18 years of age must have the recommendation below signed and available.

Name _____ Phone _____

Address _____ City _____ Zip _____

Driver's License # _____ Social Security Number _____

Please have your pastor read and sign the statement below:

As his/her pastor, I am acquainted with _____ 's gifts for
(Name of Participant)

ministry with youth and recommend him/her as an adult volunteer/sponsor for
Sea City Work Camp. I, as the Pastor of _____ Church, I

acknowledge that _____ has taken all the appropriate
(Name of Participant)

Child Safety Course and has a current background check that has been done in
the last 2 years. And that all of this current paperwork is on file in our Church
Offices.

Pastor Signature: _____ Date _____

Sea City Work Camp “ADULT” Tool & Gear List

Please put your name on **EVERYTHING** you bring to camp. You may want to use fluorescent tape or paint so you can easily identify your tools. Bring a bucket or toolbox to carry your tools to and from the work site. No need to buy new tools for camp. Accumulate what you can from the list below.

- | | |
|--|---|
| <input type="checkbox"/> hammer (recommend a 16 oz claw) | <input type="checkbox"/> nail apron |
| <input type="checkbox"/> pry bar | <input type="checkbox"/> utility shears |
| <input type="checkbox"/> work gloves | <input type="checkbox"/> caulk gun |
| <input type="checkbox"/> paint brushes (2) 2” for trim, (2) 4” for walls | <input type="checkbox"/> paint roller frame |
| <input type="checkbox"/> paint cups or empty coffee cans for painting or roofing nails | <input type="checkbox"/> putty knife |
| <input type="checkbox"/> pliers | <input type="checkbox"/> crescent wrench |
| <input type="checkbox"/> tape measure (at least 12 foot) | <input type="checkbox"/> flat and Phillips screw drivers |
| <input type="checkbox"/> 2 pencils | <input type="checkbox"/> safety glasses |
| <input type="checkbox"/> 2 dust masks | <input type="checkbox"/> personalized drinking cup or sports bottle |
| <input type="checkbox"/> bucket or tool box to carry tools | <input type="checkbox"/> 2 pruning saws |
| <input type="checkbox"/> hack saw | <input type="checkbox"/> cordless drill/screwdriver |
| <input type="checkbox"/> knee pads | <input type="checkbox"/> chalk line |

Additional items for roofing

- circular saw
- jig saw
- carpenters squares - small and large

ALSO BRING:

- cap or hat
- sunglasses
- sunscreen
- work clothes for 5 days (old cotton shirts or T-shirts, durable, closed toe shoes, old shorts or pants) **Sandals or flip-flops will not be allowed on the work site.**
- at least one throw away outfit for painting
- throw away outfit for mud bowl
- cot or air mattress with sleeping gear & pillow – for space concerns – twin size air mattress
- towels & wash cloths for 5 days
- personalized drinking cup or sports bottle
- casual clothing for evening – must represent the church!
- swim suit, cover-up, beach towel
- plastic bag or laundry bag for dirty clothes
- personal hygiene products
- IPOD , MP3 for night time **ONLY! Will not be allowed on work sites, at evening activities or @ worship.**
- carrier or bag for shower supplies

ALL FAMILIES PLEASE BRING

3 - 12 PACK-12oz PLASTIC BOTTLES OF GATORADE

Any flavor!
THANKS!!

No swim suits on work sites. Shirts are to be worn at all times.
No baggy clothing that could get hung on equipment, tools, or work area.
No mid-driff or low cut blouses or low- rise pants or shorts.

ALL CLOTHING SHOULD REPRESENT THE CHURCH!

MOST OF ALL –
A COOPERATIVE, SELFLESS, HARD WORKING ATTITUDE!!!

THIS PAGE IS TO BE KEPT FOR YOUR RECORDS

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 person leaving camp for any reason; **MUST** notify Camp Director. Youth Camper can only be picked up by a parent or legal guardian. SCWC is **NOT** responsible for any damage or theft to personal vehicles.
10. Personal YOUTH Cell phones will **NOT** be allowed on work sites, during worship or during organized activities. If the cell phone of the youth is taken up it will not be returned until close of camp.
11. All Campers & Volunteers are expected to assist in Camp Headquarters Clean Up – Prior to leaving Friday.

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

**THANK YOU
FOR TO GIVING OF YOURSELF
FOR THIS WEEK
TO BE A ROLE MODEL
TO OUR YOUTH AND BEING
THE HANDS & FEET OF CHRIST
FOR OUR COMMUNITY!!!**