

IMPACT 2007 Application

I am a: camper sponsor teacher

I am attending: Impact Junior Impact Senior

Payment Information: Check made payable to Lipscomb University

I am enclosing: **Non-refundable deposit of \$25** **Total fee of \$195 for MPACT Senior**
Total fee of \$135 for IMPACT Junior **Total fee of \$210 for IMPACT Senior after April 2**
Total fee of \$150 for IMPACT Junior after April 2

PLEASE PRINT AND COMPLETE THE FRONT AND BACK OF THIS APPLICATION

Camper Name: _____ **Parent's Name** _____

Gender: Male Female **Age:** _____ **Birth date:** _____ **Grade:** _____ ('06 – '07 school year)

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: (____) _____ **Parents Cell Phone:** (____) _____

Tee Shirt Size: S M L XL XXL XXXL

Home Congregation: _____ **Youth Minister:** _____ **Phone** (____) _____

Are you coming with a group? Yes No **Have you attended Impact in the past?** Yes No

Group leader's name: _____ **Phone** (____) _____

(If you are coming with a group and group leader is not your youth minister)

Emergency Medical Release

Name of insurance company _____ **Policy Number** _____

Insurance Company Address _____ **Phone #** (____) _____

Mother's Employer _____ **Work Phone #** (____) _____

Father's Employer _____ **Work Phone #** (____) _____

Please check the medications permitted to be given to _____ **(child's name)**

Decongestant (ex. Dristan)	_____	Ibuprofen	_____
Hydrocortisone cream	_____	Antacid (ex. Tums)	_____
Cough Syrup	_____	Throat/cough lozenge	_____
Acetaminophen (ex. Tylenol)	_____		
Benadryl	_____	None of the above	_____

In order to serve your child better please inform us of any conditions which are pertinent to the care and maintenance of his/her health. List any allergies or medications taken regularly.

(More information continued on back)

Medical and Liability Release

I hereby authorize the director of Impact 2007, the Lipscomb University Nurses or their designees to act for me according to his/her best judgment in any emergency requiring medical attention and to give the medications indicated on the previous page as deemed medically needed to my son/daughter.

I hereby release Lipscomb University, its directors, officers, employees, agents (the "Releasees"), from any and all liability for sickness, accidents or injuries of any nature or cause whatsoever to my child or me, other than due to the negligence or fault of the Releasees, while attending, traveling to or leaving Impact 2007.

Signed _____ Date _____
(parent or guardian)

NOTE TO PARENTS/GUARDIANS: We use the most convenient hospital emergency room for any incurred injuries. The camp director gives permission for the hospital staff to perform treatment, as necessary, or considered necessary; please indicate if this is objectionable to you. We will always try to notify the parents/guardians first. For minor injuries, sickness, campers will be taken to the Lipscomb University Health Center.

Impact Guidelines

All CAMPERS and PARENTS must read the following statement and sign below:

I agree to follow all guidelines and requirements of Impact and will participate and cooperate in all its activities. I also understand that my bags and luggage may be inspected at check-in and my room may be searched at any time.

1. Campers are to be in their dormitories by 11:00 p.m. each night unless otherwise instructed by the IMPACT staff.
2. All teen participants are to attend all sessions of IMPACT.
3. Impact participants are not to leave the campus.
4. Drugs, tobacco, alcohol, fireworks, and all types of weapons are not permitted on the Lipscomb campus. Your counselor should be notified of any prescription drugs you are taking.
5. Radios, TV's, cassette players, CD players, walkmans, pagers, laser pointers, Gameboys, palm pilots, DVD players, computers etc. are **NOT** permitted. These items can easily be lost or stolen.
6. Cell phones are permitted IN DORM ROOMS ONLY.
7. Each dorm room is to be left clean by 7:30 each morning.
8. Report illnesses to a counselor or staff member as soon as possible. A nurse is on duty in the Health Center from 10:00 a.m. until 7:00 p.m.
9. Your room key must be returned to the front desk of your dorm before you leave for home. Your \$20 key/clean room deposit will then be returned after your counselor inspects your room.
10. **Dress Code:**
Girls: Modest, high-necked shirts. If sleeveless, the band/straps should be more than one-inch wide and with no bra straps showing. When you raise your arms you shouldn't be able to see your stomach. When you bend down, you shouldn't be able to see your underwear.
Guys: Shirts – No wife-beaters, cut-off's, or tanks with the wide-open armholes.
Shorts: Girls and guys are expected to wear long shorts to follow Lipscomb's dress code. We recognize that it's difficult for some girls to find longer shorts. So, here's the compromise: Shorts must be modest and come at least to mid thigh. We should not be able to see your underwear at any time—from the top or the bottom.
11. IMPACT officials reserve the right to remove any camper from the campus for disorderly conduct. No refund will be given in such a case. Any transportation costs are the responsibility of the camper and/or parent or legal guardian.
12. No skateboards allowed. Roller blades, bicycles, and scooters are permitted only with proper safety equipment (helmet, kneepads and elbow pads) in designated areas.
13. Conduct yourself in such a way that it would be best for all if everyone behaved as you do.

Camper signature

Parent Signature

Printed Camper Name