

Praise The Lord-

## *Jubilee in 2011*

### ***Summer Mission Team-June 18 – July 23***

Starts at 5:00 PM on Saturday with the evening meal, registration and worship service.  
\$200.00 per Team Member is requested to help cover food and insurance for the month.

**Please do not arrive until opening time.**

### ***Jr. Camp-July 6-9***

Starts at 5:00 PM on Wednesday with the evening meal, registration and worship service.

**Please do not arrive until opening time.**

### ***Youth Camp-June 20-25***

Starts at 5:00 PM on Monday with the evening meal, registration, and worship service.

**Please do not arrive until opening time.**

### ***Youth Camp-July 11-16 2011***

### ***Youth Camp-July 18-23 2011***

**Junior Camp** is for ages 8-12 boys and girls.

Please **no one under 8 years of age**-Parents or Chaperones are not to bring younger children under the age of 8, this distracts Chaperones from their role while here at camp. Activities are not set for younger children.

**Youth Camp** is for ages 13-18. Youth camp is programmed for ages 13-18.

**Please do not bring younger children.** Parents or Chaperones are not to bring younger **children under the age of 13,** this distracts Chaperones from their role while here at camp.

Please do not put us in the position of saying no to you concerning younger children.

**PRE-REGISTER AS EARLY AS POSSIBLE. THIS ALLOWS US TIME TO MAKE PLANS BASED ON THE NUMBER OF CAMPERS THAT WILL BE ATTENDING. THANK YOU!**

### **2011 Retreat Fees**

**Jr. Retreat: \$149.00 per camper  
\$99.00 per chaperone  
Youth Retreat: \$199.00 per camper  
\$149.00 per chaperone**

Payment Schedule:

10% Non-Refundable Due with reservations \_\_\_\_\_ 2<sup>nd</sup> Payment 15% Due 90 days prior to arrival \_\_\_\_\_

3<sup>rd</sup> Payment 25% Due 30 days prior to arrival \_\_\_\_\_ Balance Due On Arrival \_\_\_\_\_

Campers Name: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_  
 (if camper is under the age of 18)

Address: \_\_\_\_\_  
 \_\_\_\_\_

Campers Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Parent or Guardian Work Number: \_\_\_\_\_

Extra Number in Event of Emergency: \_\_\_\_\_

Name Of Church, Pastor, Address, and Phone Number where you are a member.

\_\_\_\_\_  
 \_\_\_\_\_

Name of chaperone during retreat: \_\_\_\_\_

***Check the Retreat and the Dates you plan to attend:***

- Staff Training Week----June 18 – July 23, 2011
- Summer Mission Team----June 18 – July 23, 2011
- Jr. Retreat----July 6-9, 2011
- Youth Retreat----June 20-25, 2011
- Youth Retreat----July 11-16, 2011
- Youth Retreat---- July 18-23, 2011

**(The Junior and Youth Retreats will begin at 5:00 PM on the first day and end the morning of the last day after breakfast approximately 10:00 AM)**



## FOR THEIR SAFETY!!

(Applies to campers under adult age)

Camp Jubilee is situated on a farm, and campers sleep in dorms. There will be hayrides so be aware of campers with hay or pollen allergies. We serve a wide variety of camp style foods, so know if any of your campers have food allergies, as they may find they cannot eat some of our foods. **We request a parent or legal guardian accompany any camper with special needs, ( food allergies, asthma, breathing problems, or any other condition or special need, allergies to any insects such as bees, wasps, and or mosquitos.....etc).**

We want these children/youth to come, but for their own safety and because we love them, a parent or legal guardian is encouraged to accompany them.

If a parent or legal guardian cannot come, we request that a responsible person be chosen to stand in for the parent/guardian. This person will be responsible for the safety of the camper with medical needs. A notarized letter giving the person, representing the parent/guardian, consent to act in behalf of the camper in the event medical treatment is required. **This person will assume full responsibility for this child/youth at all times.**

**NOTARIZATION REQUIRED**

**MEDICAL FORM-CAMP JUBILEE**

**MAILING INFORMATION**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

RELATIVE: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

(Person to contact in the event of an emergency)

**Health Insurance Information**

\*Camp Jubilee carries a secondary insurance that will pick up after you and your personal insurance has paid.

Health Insurance Company: \_\_\_\_\_

Insurance Company Address: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Insurance Company Phone Number: \_\_\_\_\_

**PLEASE ATTACH A COPY OF YOUR INSURANCE CARD TO THE BOTTOM OF THIS FORM.**

COPY OF INSURANCE CARD:

Notary Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **NOTARIZATION REQUIRED Camp Jubilee**

### **MEDICAL INFORMATION:**

Person to contact if relative cannot be reached: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name and phone number of personal physician: \_\_\_\_\_

\_\_\_\_\_

List all medication you are currently taking: \_\_\_\_\_

\_\_\_\_\_

Reason medication is required: \_\_\_\_\_

**Date of last Tetanus shot:** \_\_\_\_\_ **(Important, be sure to check with your Dr.)**

List any physical or activity restrictions: \_\_\_\_\_

List allergies and types of allergies: \_\_\_\_\_

What treatment is required for allergies: \_\_\_\_\_

List any conditions such as diabetes, nose bleeds, migraines, etc. \_\_\_\_\_

\_\_\_\_\_

List required treatment for any conditions listed above: \_\_\_\_\_

\_\_\_\_\_

List any heat related conditions: \_\_\_\_\_

Sleep Walk: Yes \_\_\_\_\_ No \_\_\_\_\_

## Camp Jubilee

**A Medical & Accident Waiver Form, Special Activities Form, Medical & Liability Release Form, and Medical Form must be completed for each person attending camp and must be signed by a notary. This request is for the safety of your group and we appreciate your attention to this matter.**

I hereby grant permission for my child, \_\_\_\_\_, to attend Camp

Jubilee and to be under the care of \_\_\_\_\_  
(name of person in charge from your church)

from \_\_\_\_\_  
(name of church group or organization)

Dates: \_\_\_\_\_ In the event of a medical emergency, I understand  
(dates to be at camp)

every effort will be made to contact parents or guardians of campers. In the event I cannot be reached, I hereby give permission to the Physician selected by

\_\_\_\_\_ and camp director to hospitalize and secure proper treatment,  
(person in Church who is in charge)  
and order injection, anesthesia, surgery, or etc. for my child as named above.

**I also affirm that the medical information on the prior form is complete and correct to the best of my knowledge.**

Signature of Parent(s) or Guardian(s):  
\_\_\_\_\_

Date: \_\_\_\_\_

**Many of our activities are a Christian Camp/ Agritourism setting. Therefore, under Tennessee law there is no liability for an injury or death of a participant in an Agritourism activity.**

Notarization Required

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Date

# *Special Activities-Permission to Participate form* Notarized Permission Form – Camp Jubilee

## **Off Camp Activities**

\_\_\_\_\_ has my permission to participate in off camp  
(Your child's name)  
activities. \_\_\_\_\_ will be attending camp on the following dates  
(Your child's name)  
\_\_\_\_\_ with \_\_\_\_\_.  
(dates attending camp) (Church or group name)

Signature of parent(s) or legal guardian(s):

\_\_\_\_\_

## **Water Activities**

\_\_\_\_\_ has my permission to participate in the water activities  
(Your child's name)  
at Camp Jubilee. \_\_\_\_\_ will be attending camp on the following  
(Your child's name)  
dates \_\_\_\_\_ with \_\_\_\_\_.  
(dates attending camp) (Church or group name)

Signature of parent(s) or legal guardian(s):

\_\_\_\_\_

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Date

# Notarization Required



## MEDICAL & ACCIDENT WAIVER FOR OFF CAMP TUBING, HIKING, OR OTHER ACTIVITIES Notarized Permission Form

Time for off camp activities have been set into the schedule at the request of groups coming in that are interested in participating in area recreations such as hiking and tubing.

I understand that any activity off camp releases Camp Jubilee, Inc., and Ronnie Owens/ Ronnie Owens Ministries from any legal responsibilities due to accidents or any situation that may occur during the activity or during transport to and from off camp activities.

\_\_\_\_\_  
Activity Date

\_\_\_\_\_  
Church Name

\_\_\_\_\_  
Church Chaperone

\_\_\_\_\_  
Participant

\_\_\_\_\_  
Witness Date

\_\_\_\_\_  
Notary Signature Date

Notarization Required

# Medical & Liability Release Form

Camp Jubilee/Ronnie Owens Ministries  
Notarized Permission Form

Participant’s Full Legal Name: \_\_\_\_\_

By signing this form, I agree that I have read and do agree that Camp Jubilee, Inc., Ronnie Owens, or Ronnie Owens Ministries will not be held in any way responsible for any accidents or injuries either coming or going during this trip. This will include but is not limited to accidents that may occur on or off camp, or in relation to any equipment I may be using. This also includes the, waterslide, pool, hayrides, climbing wall, zip line or any and all other activities I participate in.

I understand that I am taking this trip and participating in any activities with full knowledge that any and all accidents/injuries will be my responsibility in all aspects. This will include and is not limited to any and all legal and medical responsibilities. I understand that Camp Jubilee, Inc., Ronnie Owens/Ronnie Owens Ministries is not responsible for any accidents that may occur during this trip. This includes, but is not limited to, accidents, death, or dismemberment.

I understand that Camp Jubilee, Inc., Ronnie Owens/Ronnie Owens Ministries does not provide a guide for tubing, hiking, or any other off camp activity. I understand that Camp Jubilee, Inc., Ronnie Owens/Ronnie Owens Ministries will provide no lifeguard or medical personnel for any and all off camp activities or trips. I also understand if I become separated from the group and become lost, injured, dismembered or if death were to occur that Camp Jubilee, Inc., Ronnie Owens/Ronnie Owens Ministries is not responsible.

I understand that I am to wear a life jacket at all times during the tubing trips and have been instructed to do so for my safety. I understand that Camp Jubilee, Inc., Ronnie Owens/Ronnie Owens Ministries is not responsible for any injury, death, or dismemberment in relation to any equipment or equipment use on or off camp and that I am taking full responsibility for any and all activities.

By signing this document I am confirming that I have read this document in its entirety and I am in full understanding and agree to all of the above terms.

I \_\_\_\_\_ Date \_\_\_\_\_  
(Person responsible for participant)

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

**(Must be signed by both parents and or legal guardians if under the age of 18, if still living at home, or if the participant is still the responsibility of parents or guardians. This document must be signed by participant 18 and over including all adults, chaperones, and any and all people participating in any and or all activities in relation to Camp Jubilee, Inc., Ronnie Owens/Ronnie Owens Ministries.)**

Notary Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**Notarization Required**



# T-Shirt Order Form

## ***Church Group Order Section***

Our Church or Group \_\_\_\_\_ will need  
(Name of Church or Group placing order)

\_\_\_\_\_ Adult Small

\_\_\_\_\_ Adult X-Large

\_\_\_\_\_ Adult Medium

\_\_\_\_\_ Adult XX-Large

\_\_\_\_\_ Adult Large

\_\_\_\_\_ Adult XXX-Large

\_\_\_\_\_ Junior Retreat Shirts    \_\_\_\_\_ Youth Retreat Shirts

Name of Church or Group leader placing order: \_\_\_\_\_

Phone Number to confirm your order: \_\_\_\_\_

## ***Individual T-Shirt Order Section***

**(For Summer Mission Team Workers, Staff, and others not coming in a group)**

I, \_\_\_\_\_, will need

\_\_\_\_\_ Adult Small

\_\_\_\_\_ Adult X-Large

\_\_\_\_\_ Adult Medium

\_\_\_\_\_ Adult XX-Large

\_\_\_\_\_ Adult Large

\_\_\_\_\_ Adult XXX-Large

Name of person placing order: \_\_\_\_\_

Phone Number to confirm your order: \_\_\_\_\_

**In order for each person in your group to receive a camp T-shirt this form must be filled out and returned a.s.a.p.**

**Thank You!**



## *What to pack for Camp Jubilee:*

Enough clothes--be sure to bring enough clothes, but don't bring any item that you do not want damaged. Camp has a way of making new clothes old and old clothes older.

- \_\_\_\_\_ **Pants** (Blue Jeans)
- \_\_\_\_\_ **Shorts** (NO-Short -Shorts)
- \_\_\_\_\_ **T-Shirts & Tops**
- \_\_\_\_\_ **Swim Wear** (One Piece Only)
- \_\_\_\_\_ **Night Wear-P.J.'s**  
(People staying more than a week will be given laundry time)
- \_\_\_\_\_ **Flash Light**
- \_\_\_\_\_ **Bible**
- \_\_\_\_\_ **Medication if needed**
- \_\_\_\_\_ **Medication for headaches and stomachaches** (medicine that you are familiar with, please don't try anything new)
- \_\_\_\_\_ **Bug Spray** (A brand you are familiar with)
- \_\_\_\_\_ **Sunscreen**
- \_\_\_\_\_ **Old Shoes**
- \_\_\_\_\_ **Tennis Shoes** (very important because of rocks, sticks, and stumps)
- \_\_\_\_\_ **Flip Flops**
- \_\_\_\_\_ **Bed Sheet Set** (full size)
- \_\_\_\_\_ **Watch**
- \_\_\_\_\_ **Clothes Hangers**
- \_\_\_\_\_ **Lotion**
- \_\_\_\_\_ **Sunburn Lotion**
- \_\_\_\_\_ **Shaving Supplies**
- \_\_\_\_\_ **Bath Soap and Supplies**
- \_\_\_\_\_ **Bath Towels**
- \_\_\_\_\_ **Beach Towels**
- \_\_\_\_\_ **Camera** (disposable is better than your mom's brand new Cannon or Nikon)
- \_\_\_\_\_ **Pillow**
- \_\_\_\_\_ **Blanket**
- \_\_\_\_\_ **Sleeping Bag**
- \_\_\_\_\_ **Tooth Brush & Tooth Paste**
- \_\_\_\_\_ **Hair Supplies** (if you have long hair you may need something to keep hair up)
- \_\_\_\_\_ **Hat** (optional)
- \_\_\_\_\_ **Spending money for camp store if you want**



Extra packing for youth week only:

### Hikers:

- \_\_\_\_\_ Old back pack (for water bottle , snacks, flash light, etc.)
- \_\_\_\_\_ Must wear tennis shoes and socks No Sandals or Flip Flops
- \_\_\_\_\_ *All group leaders are required to have Walkie-Talkies*
- \_\_\_\_\_ Cheap poncho
- \_\_\_\_\_ Small trash bag for trash

### Tubing:

- \_\_\_\_\_ Water Shoes

### Dress Code:

We are a Christian Camp and we are to behave and dress in a manner pleasing to the Lord we serve.

Jeans, shorts, and T-Shirts are accepted. ***Do not*** wear T-Shirts with inappropriate messages or inappropriate images and that all shirts cover the entire midriff area even with arms extended. No spaghetti straps, muscle shirts or short shorts. Shorts that are cut too low in the front or that can be mistaken for swimwear are not accepted. Shorts need to be **no shorter than 5 inches from bend of knee.**

Swimsuits need to be one piece, not cut too low in the front or too high in the back. **Two piece swimwear is NOT permitted.**

## Direction to Camp Jubilee

### Coming from South

Take I-40 to 640 East to the Broadway exit, turn left  
Come thru Maynardville into Tazewell  
Go to last red light which will be at HWY 345, turn right  
Go 8 ½ miles  
Turn right on 63 East  
Go 5 miles, come to a dead end, turn left  
Go 1 mile, turn right onto Powell River Rd  
Camp is ½ mile on the left

### Coming from North

On I-75 take first Corbin, KY exit, turn left to Middlesboro, KY  
Go all the way thru Middlesboro get in the right lane going thru tunnel  
Outside the tunnel take the ramp to HWY 58  
Go 13 miles, turn right after the flashing light  
Go 1 block to a dead end, turn right  
Go ½ mile, turn left on HWY 744  
Go 6 ½ miles, turn left on Powell River Rd.  
Camp is ½ mile on the left

**Camp Address & Info:**  
**Ronnie Owens Ministries/Camp Jubilee**  
**3316 Owens Ridge Rd.**  
**Tazewell, TN 37879**  
**423-733-8581 Camp Office**  
**423-733-4292 Home**  
**Email: [ronnieowensministries@gmail.com](mailto:ronnieowensministries@gmail.com)**

**[www.ronnieowensministries.com](http://www.ronnieowensministries.com)**

**[www.campjubileeinc.com](http://www.campjubileeinc.com)**

Please return all camp forms to the office address listed above. Thanks!