

# *Journey with* **JESUS**



**CHILD EVANGELISM OUTREACH INC . . .** sponsors the week of **KINGS Camp™** each year. We are a non-profit, non-denominational Christian ministry to boys and girls operating under the direction of an independent board of directors and our local missionary directors, John & Gayle Stahlman. Child Evangelism Outreach Inc. has existed in this area for about 70 years. Our camp staff is composed of a group of dedicated individuals who are committed to the safety and well-being of every child at camp. The staff desires to see salvation decisions and spiritual growth in the boys and girls God brings to **KINGS Camp™** each year.

As a camp, we comply with all local, state, and federal ordinances designed to ensure a safe and enjoyable experience for all who attend. **A PA State Police Criminal Background Check and Child Abuse History Clearance is completed for each adult staff in compliance with the new Pennsylvania Child Protective Services Law.** In addition, references of former campers are available upon request.

## *July 22 - 27, 2018*



### **For All Boys and Girls** **Ages 7 - 13**



**KINGS CAMP** is an affordable and fun, well-rounded Christian camping experience for all young people who are between the ages of 7 and 13.

**DISCOUNTS ARE GIVEN** to families with multiple children attending camp. The discount is as follows:

First child from household pays . . . \$185.00  
Second child from household pays . . . \$175.00  
Third+ child from household pays . . . \$165.00

**PLEASE NOTE:** This is the EARLY registration cost; the total is \$15 additional per camper IF postmarked AFTER the early deadline of 6/5/2018.

### PAYMENT RESPONSIBILITY:

Some churches pay part or all of a camper's fees. If this is the case, you are responsible to know what your total personal cost will be and you must send the registration deposit and t-shirt money with registration form, regardless of who is paying for the week. This will reserve your space.

You will receive a postcard from us about a week before camp confirming your registration and giving you a balance due at camp. This total will not distinguish between your responsibility and your church's responsibility – it will only state the total due. With over 120 campers and staff, our treasurer cannot keep track of individual accounts. If, at any time, you need to know what you owe, please call our office at 724.223.0855.

A **PAYMENT PLAN** is available for anyone wishing to take advantage of making payments for camp. See registration form.

**\$45.00 deposit fee plus all t-shirt money, if purchased, is necessary to hold your space at KINGS Camp.**

**Send money with registration form!**

(THE \$45.00 DEPOSIT IS NOT REFUNDABLE; HOWEVER, ALL ADDITIONAL MONEY PAID AT ANY TIME AS PART OF YOUR CHOICE PAYMENT PLAN IS REFUNDABLE IF YOU DO NOT COME TO CAMP FOR ANY REASON)

*If you have had a NSF check returned to CEO Inc. in the past, your registration must be paid by cash or money order – NO EXCEPTIONS; THANK YOU!*

*A \$25 service charge per NSF check returned to us by your bank will be charged to you. Thank you for understanding the need to be good stewards.*

### CAMP THEME T-SHIRTS

Available for purchase with initial registration deposit. Availability guaranteed only if paid in full with registration. To order, simply add the \$12.00 fee to your registration deposit of \$45.00 and MAIL ASAP.

IF YOU DO NOT ORDER AND PAY FOR A T-SHIRT WITH YOUR REGISTRATION, THERE IS NO GUARANTEE OF EXTRA SHIRTS AT CAMP CHECK-IN.



### SAFETY FIRST AT KINGS CAMP

ALL MEDICATION BROUGHT TO CAMP MUST BE MARKED CLEARLY WITH CAMPER'S NAME AND BE IN ITS ORIGINAL CONTAINER.

A NURSE IS ON DUTY 24 HOURS EACH DAY AND WILL DISPENSE ALL MEDICATION (PRESCRIPTION OR OTHERWISE).

PLEASE DO NOT SEND BASIC FIRST-AID ITEMS SUCH AS TYLENOL, ASPIRIN, ETC. THESE ARE ALL READILY AVAILABLE IN OUR WELL-STOCKED FIRST-AID KITS.

DURING WATER ACTIVITIES AT CAMP, THE BUDDY SYSTEM IS USED FOR THE SAFETY OF ALL CHILDREN.

#### Please Note:

*Because of the Affordable Healthcare Act, you are now responsible to carry your own health insurance to cover your child while at camp. If your child does not have coverage, please note this on the registration health form. You must complete insurance for children attending KINGS Camp.*

## JOHN & GAYLE STAHLMAN

*Journeying with Jesus  
by Faith in directing  
camp for. . .*

**35 Years**





# KINGS CAMP

is held at the beautiful

**Mount Chestnut  
Nazarene Camp and Conference Center**

**177 North Road  
Butler, PA 16001**

[THIS IS THE ADDRESS TO WHICH YOU CAN WRITE LETTERS TO YOUR CAMPER]



**WE  
WALK  
BY FAITH  
NOT BY SIGHT**

~~~~~

**KINGS CAMP 2018**

## DIRECTIONS TO THE CAMP:

From Washington, take Route 79 North to Route 422 (Exit 99 – New Castle/Butler). Exit 99 is approximately one hour from Washington, PA. Follow Route 422 East (toward Butler) for 9 miles to the first traffic light. Turn LEFT onto North Road. Go about 8/10 of a mile. Mount Chestnut Nazarene District Center is on the left. Watch for the KINGS CAMP signs, directing you to parking and registration areas.

**PLEASE DO NOT ARRIVE  
BEFORE 3:00 PM ON SUNDAY!**



KINGS CAMP is open to ALL boys and girls who are ages 7 to 13 *as of July 31, 2018*. Every boy and girl is welcome regardless of any or no church affiliation. We do not discriminate based on race, religion, or family history.

**CHECK-IN** for camp takes place on **Sunday, July 22, 2018**. Since we will be busy preparing for your arrival, please **do not arrive at the registration area until after 3:00 PM**. Registration line will be open from **3:15-5:15 PM**. If you arrive after 5:15 PM, you may need to check-in with staff at the dining hall. It is advisable to have your camper here before the first activity, which is Sunday evening dinner.

The **KINGS CAMP AWARDS PROGRAM** will take place on **Friday, July 27th at 7:05 PM**. Plan to join us as we celebrate a great week of camp. **DOORS OPEN AT 6:45 PM** for the Awards Program. **Family and friends are all invited to attend!**

***We request that you DO NOT ask for early dismissal for your camper, except in the case of an extreme emergency.***



## NOTE TO PARENTS:

Campers are expected to stay the entire week of camp, except in cases of medical or family emergency. KINGS Camp reserves the right to set standards of conduct for all campers. Campers who violate these standards may be subject to early dismissal at the parent's expense.

Calls will not be made or received by campers or staff unless there is an emergency. The camp experience and electronics do not mix! Please send mail to your campers during the week! It makes for a great experience at mail call each day.



## PACKING LIST

Please note carefully the checklist as to what you need to bring to camp. Please pay special attention to modesty and your testimony before others as you pack.

The staff reserves the right to ask any camper to change if clothing is deemed inappropriate. When in doubt, please leave it out (of your suitcase, that is!)

PLEASE **LABEL** ALL ITEMS

- \_\_\_\_\_ Sleeping Bag or Sheets/Blankets (most beds are twin)
- \_\_\_\_\_ Pillow (and/or a stuffed animal friend if you wish)
- \_\_\_\_\_ Complete Bible (not NT only; it is best if it DOESN'T have indexing tabs)
- \_\_\_\_\_ Notebook; Pens or Pencils
- \_\_\_\_\_ Play Clothes (for everyday activities)
- \_\_\_\_\_ ONE DRESS OUTFIT for Awards Program
- \_\_\_\_\_ Tennis Shoes/Comfortable Walking Shoes (must have at least one pair closed-toe)
- \_\_\_\_\_ Socks – must have for hiking and some game activities
- \_\_\_\_\_ Sandals or Water Shoes (optional)
- \_\_\_\_\_ Jacket, Sweater/Sweatshirt (for cool mornings/evenings)
- \_\_\_\_\_ Raincoat or Umbrella (optional – not absolutely necessary)
- \_\_\_\_\_ Swimwear: MODEST PLEASE  
**Conservative one-piece swimwear for girls and boxer-type swim trunks for guys are appropriate**
- \_\_\_\_\_ Underclothes
- \_\_\_\_\_ Towels and Washcloths; Large/Beach Towel for Water Sports
- \_\_\_\_\_ Toothbrush and Toothpaste
- \_\_\_\_\_ Soap, Deodorant, Other Personal Items
- \_\_\_\_\_ Comb and/or Brush
- \_\_\_\_\_ Alarm Clock (optional) – **NO RADIO OR CELL PHONE TYPE**
- \_\_\_\_\_ Flashlight
- \_\_\_\_\_ Cards, Writing Paper, Envelopes and Stamps (it is helpful to address and stamp envelopes for younger campers so they can write home without too much difficulty)
- \_\_\_\_\_ Snack Shop Money and Missionary Offering Money (amount to be determined by parents)
- \_\_\_\_\_ Camera (disposable best for young campers) (optional – not absolutely necessary)
- \_\_\_\_\_ Good Attitude and Camp Spirit!

### What Not To Bring:

**No Electronic Devices of Any Kind** - cell phones, iPods, iPads, computers, laptops, games, radios, CD players, TVs, PDAs, eBook readers, etc.  
**No Magazines, Illegal Drugs, Firearms or Weapons, Tobacco, or Alcohol, Firecrackers or Explosives of any kind**

### **CAMPER DRESS STANDARDS** Modest Clothing please!

- No Tight-fitting pants or shorts—no short shorts, please!**
- No Halter/Spaghetti Strap tops; modest tank tops only**
- No T-Shirts with questionable slogans/graphics**
- No Short Skirts or Dresses—to the top of the knee, please!**
- No Spandex items or tight-fitting “skinny” jeans**
- No Two-piece swimsuits unless top goes over the bottoms – Please no bare midriffs or low swimsuit fronts!**

## **The Totally Awesome KINGS CAMP EXPERIENCE**



**Bible Lessons with Princess Julia**

**Evening Chapel with. . .it's a surprise!**

**Missionary Emphasis**

[We will all be challenged daily to give to our camp missionary; come prepared to help the staff meet the challenge]

**Recreation & Outdoor Games**

**Surprise Time with Princess Gayle & Princess Brenda**

[You never know what might happen during Surprise Time]

**Snack Shop every day** [except Sunday]

**Camp Fire** [weather and time permitting]

**Good Home-Style Cooking—including a gluten-free menu!**

[All you can eat... and more; **if you have a special dietary restriction, that isn't a problem** for our kitchen staff. Parents may send special foods for our cooks to prepare or evening snacks from home – we offer a gluten-free menu and we will do our very best to accommodate your child's needs at every meal.]

**Princess White Glove**

**Cabin Time**

**Hiking**

**Water Slide/Sports**

**Archery Skills**

**Ropes and Obstacle Course**

**Crafts**

**Fishing Skills**

**New Camp Friends**

**Dedicated Counselors and Staff**



# KINGS CAMP – CAMPER REGISTRATION FORM 2018

[PLEASE COMPLETE ONE FORM PER CHILD YOU ARE REGISTERING]

|                 |
|-----------------|
| Office Use Only |
| C _____         |
| T _____         |
| E _____         |
| E _____         |

**CAMPER'S NAME** [FIRST & LAST—PLEASE PRINT] \_\_\_\_\_

Is child a first-time KINGS Camper This Year?  **YES**     **NO**

**DATE OF BIRTH** [MM/DD/YYYY] \_\_\_\_/\_\_\_\_/\_\_\_\_    **AGE ON FIRST DAY OF CAMP 2018** \_\_\_\_\_

**HOME CHURCH** [IF ANY] \_\_\_\_\_

CHILD LIVES WITH  **PARENT(S)**     **GRANDPARENT(S)**     **OTHER:** \_\_\_\_\_

**NAME(S) OF GUARDIAN:** \_\_\_\_\_

**HOME ADDRESS** [COMPLETE MAILING ADDRESS WITH ZIP CODE] \_\_\_\_\_

**PRIMARY EMAIL ADDRESS** \_\_\_\_\_    **PRIMARY PHONE #** \_\_\_\_\_

**ANOTHER #** [IN CASE OF EMERGENCY AND YOU CANNOT BE REACHED] \_\_\_\_\_

IS THIS NUMBER:  **WORK**     **FAMILY**     **FRIEND** Name: \_\_\_\_\_

DO YOU HAVE **ONE** CABIN MATE REQUEST: \_\_\_\_\_  
(YOU MUST CHOOSE THIS PERSON AND HE/SHE MUST CHOOSE YOU—CAMPER'S OF LIKE AGE ARE PLACED TOGETHER)

CHECK **EVERY** APPROPRIATE SPACE **FOR THIS CAMPER ONLY:**

- CAMPER #1 from this family POSTMARKED ON OR BEFORE JUNE 5, 2018                    **\$185.00**
- CAMPER #1 from this family POSTMARKED AFTER JUNE 5, 2018                            **\$200.00**
- CAMPER #2 from this family POSTMARKED ON OR BEFORE JUNE 5, 2018                    **\$175.00**
- CAMPER #2 from this family POSTMARKED AFTER JUNE 5, 2018                            **\$190.00**
- CAMPER #3+ from this family POSTMARKED ON OR BEFORE JUNE 5, 2018                    **\$165.00**
- CAMPER #3+ from this family POSTMARKED AFTER JUNE 5, 2018                            **\$180.00**
- T-SHIRT ORDERED AND SIZE MARKED IN BOX UP THROUGH XL                            **\$ 12.00**
- T-SHIRT ORDERED AND SIZE MARKED IN BOX 2X or 3X ONLY                                **\$ 14.00**

| OPTIONAL T-SHIRT ORDER FORM                                            |                                |
|------------------------------------------------------------------------|--------------------------------|
| <input type="checkbox"/> MEDIUM YOUTH <b>\$12.00</b>                   | Size 10/12                     |
| <input type="checkbox"/> LARGE YOUTH <b>\$12.00</b>                    | Size 14/16                     |
| <input type="checkbox"/> SMALL ADULT <b>\$12.00</b>                    | Same as L Youth, except length |
| <input type="checkbox"/> MEDIUM ADULT <b>\$12.00</b>                   |                                |
| <input type="checkbox"/> LARGE ADULT <b>\$12.00</b>                    |                                |
| <input type="checkbox"/> X-LARGE ADULT <b>\$12.00</b>                  |                                |
| <input type="checkbox"/> 2X ADULT <b>\$14.00</b>                       |                                |
| <input type="checkbox"/> 3X ADULT <b>\$14.00</b>                       |                                |
| CHECK SIZE DESIRED—IF NOT ORDERED<br>HERE, SHIRTS MAY NOT BE AVAILABLE |                                |

**We can now accept  
camp DEPOSITS  
through PayPal.  
Call for details  
724-223-0855**

|                                                                             |                                                                          |            |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------|------------|
| <b>LIST FEES FOR THIS CAMPER</b>                                            | CAMPER FEE [from above]                                                  | \$ _____   |
|                                                                             | T-SHIRT FEE                                                              | \$ _____   |
| <b>TOTAL COST FOR THIS CAMPER ONLY</b>                                      |                                                                          | \$ _____   |
| <b>DEPOSIT INCLUDED WITH THIS FORM</b>                                      |                                                                          | \$ _____   |
|                                                                             | <small>(MUST BE A MINIMUM OF \$45 REGISTRATION PLUS T-SHIRT FEE)</small> | - \$ _____ |
| <b>REMAINING BALANCE FOR THIS CAMPER ONLY</b>                               |                                                                          | \$ _____   |
| ~ DO NOT SUBTRACT CHURCH OR SCHOLARSHIP AWARD—THIS WILL BE DONE IN OFFICE ~ |                                                                          |            |

CHOOSE **TWO** ELECTIVES FOR THIS CAMPER:

- ARCHERY   
 CRAFTS   
 FISHING   
 ROPES/OBSTACLES   
 WATER SPORTS

Send Completed Form (including medical side) To:

|                      |                      |
|----------------------|----------------------|
| <b>Office Use:</b>   |                      |
| Total _____          | Add'l Payments _____ |
| Schol _____          |                      |
| Staff _____          |                      |
| PM Date ____/____/18 | Balance Due _____    |

**KINGS CAMP**  
**c/o CEO Inc.**  
**1654 Park Avenue**  
**Washington, PA 15301-5965**

*For more information, please call 724.223.0855*

# MEDICAL/HEALTH FORM

(MUST be completed in its entirety and signed for child to attend KINGS Camp)

CAMPER'S NAME [FIRST & LAST—PLEASE PRINT] \_\_\_\_\_

- MALE  
 FEMALE

Does child go by a different FIRST name \_\_\_\_\_

(NOT nickname or pet name - i.e. Chris instead of Christopher or Ellie instead of Eleanor)

HAS CAMPER BEEN PREVIOUSLY DIAGNOSED BY A MEDICAL PROFESSIONAL AND/OR SOCIAL WORKER WITH ANY OF THE FOLLOWING?

- |                                    |                                            |                                   |                                         |                                          |
|------------------------------------|--------------------------------------------|-----------------------------------|-----------------------------------------|------------------------------------------|
| <input type="checkbox"/> ADD/ADHD  | <input type="checkbox"/> ASPERGERS         | <input type="checkbox"/> DYSLEXIA | <input type="checkbox"/> CELIACS        | <input type="checkbox"/> CYSTIC FIBROSIS |
| <input type="checkbox"/> ASTHMA    | <input type="checkbox"/> ACID REFLUX       | <input type="checkbox"/> DIABETES | <input type="checkbox"/> KIDNEY ISSUES: | <input type="checkbox"/> HEART ISSUES:   |
| <input type="checkbox"/> MIGRAINES | <input type="checkbox"/> EPILEPSY/SEIZURES |                                   | _____ PLEASE EXPLAIN                    | _____ PLEASE EXPLAIN                     |

OTHER: \_\_\_\_\_ PLEASE LIST OR EXPLAIN

*Please note that our camp is open to all boys and girls; however, our program is not conducive to, nor do we have the staff and ability to handle severe health issues or cases of learning or physical disability that would otherwise require a full-time TSS or other special caregiver.*

IN ADDITION, DOES CAMPER EXPERIENCE ON A RECURRING BASIS OR HAS CAMPER BEEN RECENTLY DIAGNOSED WITH ANY OF THE FOLLOWING?

- |                                     |                                       |                                             |                                     |                                          |
|-------------------------------------|---------------------------------------|---------------------------------------------|-------------------------------------|------------------------------------------|
| <input type="checkbox"/> EARACHES   | <input type="checkbox"/> HEADACHES    | <input type="checkbox"/> STOMACH ISSUES     | <input type="checkbox"/> SINUSITIS  | <input type="checkbox"/> ASTHMA          |
| <input type="checkbox"/> BEDWETTING | <input type="checkbox"/> SLEEPWALKING | <input type="checkbox"/> SORE THROATS       | <input type="checkbox"/> NOSEBLEEDS | <input type="checkbox"/> TEMPER TANTRUMS |
| <input type="checkbox"/> SEIZURES   | <input type="checkbox"/> HYPERTENSION | <input type="checkbox"/> RESPIRATORY ISSUES |                                     |                                          |

ALLERGIES: \_\_\_\_\_

FOOD INTOLERANCE: \_\_\_\_\_

MEDICATION INTOLERANCE: \_\_\_\_\_

WILL YOU BE SENDING PRESCRIBED MEDICATIONS AND/OR SPECIAL DIETARY FOODS TO CAMP? If yes, please list what you are aware of at this point: \_\_\_\_\_

OTHER HEALTH/MEDICAL INFORMATION NOT COVERED ABOVE: \_\_\_\_\_

HEALTH INSURANCE (PLEASE PRINT ALL INFORMATION INCLUDED ON INSURANCE CARD):

Name of company: \_\_\_\_\_ Name of policy owner: \_\_\_\_\_

Policy # \_\_\_\_\_ Group # \_\_\_\_\_

ID # (IF DIFFERENT FROM POLICY OR GROUP #) \_\_\_\_\_

Please check here if the camper **IS NOT** covered under any health insurance policy—individual, family, or government program.

### Medical and Photo Release Statement:

I hereby request permission for the above-mentioned minor camper to attend KINGS Camp. In my capacity as a parent (or guardian), I hereby waive any right that I, or said minor may have to sue Child Evangelism Outreach Inc. or any of its employees or board, or camp staff, paid or volunteer as a result of any and all accidental injuries, and damages, or losses sustained by the above-mentioned minor, while participating in the camp program and any activities associated with camp. I further agree to hold Child Evangelism Outreach Inc. and any of its employees or board members, or camp staff harmless and to bear the cost of their legal defense should any suit or equitable action be brought against them as a result of any and all accidental injuries, damages, and physical or personal losses suffered by the above-mentioned minor while at KINGS Camp. I also hereby appoint the camp directors, John J. and Gayle Stahlman, and the camp nurse on duty, to act in my stead to give consent for transport to a medical facility and for emergency or surgical treatment with the doctor of their choosing if I cannot be reached and/or if deemed necessary by medical professionals.

I also give permission for camp photos of my minor child to be used in future promotional flyers and other print media, as well as electronic media, such as the Child Evangelism Outreach Inc. website or ministry Facebook group page.

PRINTED NAME OF PARENT/GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_