



IRON COUNTY YOUTH CAMP REGISTRATION \* SUMMER 2024 DATE RECEIVED \_\_\_\_\_  
# \_\_\_\_\_ \$ \_\_\_\_\_

NAME OF CAMPER \_\_\_\_\_, \_\_\_\_\_ SEX: \_\_\_\_\_  
(last) (first)  
 HOME PHONE # \_\_\_\_\_ (IN CASE OF EMERGENCY) PHONE # \_\_\_\_\_  
 HOME ADDRESS OR PO BOX # \_\_\_\_\_ CITY \_\_\_\_\_  
 STATE \_\_\_\_\_ ZIP \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ AGE ON JUNE 23,2024 \_\_\_\_\_  
 SCHOOL ATTENDED IN 2022-2023: \_\_\_\_\_ PREVIOUS BATAWAGAMA CAMPER: \_\_\_\_\_  
 NAME OF PARENT/GUARDIAN \_\_\_\_\_ PHONE # \_\_\_\_\_  
 EMAIL OF PARENT/GUARDIAN \_\_\_\_\_

*Any child, regardless of race, sex, color, creed, or origin who is at least 9 years of age & less than 17 years of age. (During their entire stay at camp) is eligible for enrollment at the Iron County Youth Camp.*

The 2024 CAMP SHIRT will be available to purchase on Sunday. There is no obligation to purchase a shirt. SIZE OF T-SHIRT \_\_\_\_\_

REGISTRATION FOR 1 WEEK...CAMPER MUST INDICATE 1 FIRST AND 1 SECOND CHOICE. (Mark your choice with an X)  
 INSTRUCTIONS FOR 2 WEEKS...CAMPER MUST INDICATE 2 FIRST AND 2 SECOND CHOICES. (Mark your choices with an X)

YOUTH CAMP	1 <sup>ST</sup> CHOICE	2 <sup>ND</sup> CHOICE
WEEK ONE.....JUNE 23-29		
WEEK TWO.....JUNE 30-JULY 6		
WEEK THREE..... JULY 7-13		
WEEK FOUR..... JULY 14-20		
WEEK FIVE..... JULY21-26		

**REGISTRATION INFORMATION FOR 2024**

The weekly charge for a camper who is a PERMANENT-RESIDENT of Iron County is \$165  
 (INCLUDES \$15 CANTEEN COUPON BOOK)

The weekly charge for a camper who is NOT a PERMANENT-RESIDENT of Iron County \$365  
 (INCLUDES \$15 CANTEEN COUPON BOOK)

**Permanent Residents of Iron County** (for at least one year before their enrollment in camp) pay in-county rates.  
**Non-Permanent Resident** who has a parent who is a permanent-resident of Iron County and whose parent has court ordered custody of the said child for the summer will also pay in-county rates. A copy of the **“Court Ordered Custody Document”** must accompany the child’s Registration Form and be mailed to Camp.

Checks or money orders will be accepted as payment for camper’s registering by mail.

Check or money orders should be made out to the: Iron County Youth Camp.

If a cancellation notice arrives 30 days prior to the camp session all payments.

(less \$50) for each week will be refunded.

If a cancellation notice arrives less than 30 days prior to camp session all payments.

(less \$100) for each week will be refunded.

You may list a friend (*of the same age*) with whom you wish to attend camp with.

Every effort will be made to assign you with your friend for the same week.

NAME	TOWN	SCHOOL

A camper mailing their registration forms in will be notified by e-mail for the week/weeks they are assigned.

# IRON COUNTY YOUTH CAMP POLICIES

## for Campers & Parents/Guardians

### MEDICAL CARE

Michigan State Law requires that all campers provide the camp with their health history and with parent/guardian release statement for any health care. Health history forms are provided with the application. Michigan Law requires that all medications (prescription & non-prescription) be stored and dispensed in the camp's HealthCare Facility. The Health Care Facility provides first aid for the campers. Ambulance and hospital care are available approximately 15 minutes from Camp.

### SPECIAL NEEDS

The Iron County Youth Camp Staff are not trained to handle special needs campers. Please contact the camp administration before enrolling children with learning disabilities, behavioral problems or significant physical limitations.

### CAMPER EXPECTATIONS & PLEDGE

*Campers are expected to accept and follow all the regulations of the Iron County Youth Camp and must sign the following Camper Pledge.*

**CAMPER PLEDGE:** As a camper of the Iron County Youth Camp, I agree to abide by Camp Regulations and to cooperate with Camp Authorities in furthering the Camp's ideals. I agree not to use or possess tobacco, smoking devices, alcoholic beverages, or unauthorized drugs, not to deface camp property, nor disregard any Camp employee's directions. I agree not to use inappropriate language, not wear inappropriate clothing, **OR MAKE THE STAY AT CAMP UNCOMFORTABLE FOR ANY OTHER CAMPER.** I understand that if I violate any Camp regulations my parents/guardians will be notified, and I will be expelled immediately from Camp without any refund.

**CAMPER SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

*Camper's Signature Required*

### PARENT / GUARDIAN AUTHORIZATION

I authorize my child to be transported to Camp related activities and to participate in all Camp activities. I give my permission to the Iron County Youth Camp, Camp Batawagama, to use limitation and obligation, photographs, film-footage, or tape recordings, which include my image, my son or daughter's image or voice for the promotion or interpreting the Camp's programs. I give my permission to any person or school to verify the information on this registration form.

**PARENT / GUARDIAN SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

### SUNDAY CAMPER ARRIVAL TIMES AT CAMP

*(Central time)*

CAMPER'S AGE GROUP (9---12).....2:00 PM  
FAMILY W/MULTIPLE AGES.....2:00 PM  
CAMPER'S AGE GROUP (13---16).....3:00 PM

### SATURDAY CAMPER-PICK-UP TIMES AT CAMP

*(Central time)*

CAMPER'S AGE GROUP (9---12).....10:00 AM  
CAMPER'S AGE GROUP (13 --16) .....10:30 AM  
FAMILY W/MULTIPLE AGES.....10:30 AM

**A YOUTH CAMP STAFF MEMBER WILL MEET EACH CAR AT THE CAMP ENTRANCE ON SUNDAY AT YOUR DESIGNATED CAMPER ARRIVAL TIME. STAFF MEMBER WILL DIRECT THE PARENTS AND CAMPER TO THEIR ASSIGNED SECTION/CABIN AREA. PARENTS WILL BE ABLE TO HELP CAMPER MOVE INTO THEIR CABIN AND MEET WITH THE CABIN COUNSELOR.**

*Thank You for choosing Camp Batawagama.*  
Brian Schulze, Manager of the Iron County Youth Camp



**HEALTH EXAMINATION RECORD**  
COMPLETED BY PARENT OR GUARDIAN

**CAMPER** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ sex \_\_\_\_\_ date of birth \_\_\_\_\_  
last name first middle

**CAMPER ADDRESS** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ zip \_\_\_\_\_  
street city state

**NAME OF PARENT OR GUARDIAN** \_\_\_\_\_

**HOME PHONE #** \_\_\_\_\_ **CELL PHONE#** \_\_\_\_\_

**WORK PHONE#** \_\_\_\_\_ **EMERGENCY#** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ zip \_\_\_\_\_  
parent or guardian's street city state

*The Iron County Youth Camp Staff are not trained to handle special needs campers. Please contact camp administration before enrolling children with learning disabilities, behavioral problems or significant physical limitations.*

1. LIST ANY CONDITIONS SUCH AS: SLEEPWALKING, FAINTING, BED WETTING, ETC.: \_\_\_\_\_
2. GLASSES NEEDED: \_\_\_\_\_ GLASSES WORN: \_\_\_\_\_
3. LIST ANY PHYSICAL LIMITATIONS: \_\_\_\_\_
4. LIST ANY SPECIAL HEALTH OR BEHAVIORAL CONDITIONS: \_\_\_\_\_
5. LIST ALL CURRENT PRESCRIBED MEDICATIONS (INCLUDING PSYCHIATRIC MEDICATIONS) & INCLUDE THOSE MEDICATIONS THAT WILL NOT BE ADMINISTERED AT CAMP.

NAME OF MEDICATION	REASON	DOSAGE

1. BRING ONLY THE EXACT QUANTITY OF MEDICATION NEEDED FOR THE WEEK AT CAMP.
2. ALL MEDICATIONS MUST BE IN THEIR ORIGINAL CONTAINER WITH THE ORIGINAL DIRECTIONS.
3. EPI-PENS AND INHALERS MUST HAVE PRESCRIPTIONS WITH THEM.
4. OVER THE COUNTER MEDICATIONS MUST BE IN A NEW, UNOPENED CONTAINER.
5. ALL MEDICATIONS MUST BE IN A CLEAR ZIP-LOCK BAG WITH THE CAMPER'S NAME ON THE OUTSIDE.
6. ALL MEDICATIONS MUST BE TURNED INTO THE CAMPER'S COUNSELOR WHEN THE CAMPER ARRIVES IN CAMP ON SUNDAY. ALL MEDICATIONS WILL BE KEPT IN THE DISPENSARY AND DISPENSED ONLY BY THE CAMP HEALTH OFFICER.

## PERSONAL MEDICAL HISTORY

		X	AGE		X	AGE
LIST ALLERGIES	ASTHMA			CARDIAC DISORDER		
REACTION & SEVERITY	MEASLES/REGULAR			RENAL DISEASE		
1.	MEASLES/GERMAN			EAR/NOSE/THROAT DYS		
2.	MUMPS			MSK DISORDER		
3.	EPILEPSY			DIABETES		
4.	CHICKEN POX			TUBERCULOSIS		
5.				OTHER/		

### IMMUNIZATIONS

	DATE		DATE		DATE
HEP. B		MEASLES		1 <sup>ST</sup> COVID VACCINE	
MUMPS		RUBELLA		2 <sup>ND</sup> COVID VACCINE	
D.T.		TETANUS		COVID BOOSTER	

- **SURGERIES:** \_\_\_\_\_
- **HISTORY OF MENTAL ILLNESS:** \_\_\_\_\_
- **LIST ANY INFECTIOUS DISEASES THAT ARE CURRENT OR THAT THE CAMPER HAS BEEN EXPOSED TO WITHIN 3 WEEKS PRIOR TO YOUR STAY AT CAMP.**
- **PARENT MUST INFORM CAMP OFFICE OF ANY INFECTIOUS DISEASES PRIOR TO ARRIVAL DATE.**

NAME OF DISEASE	DATE ACQUIRED	CURRENT STATUS

**NAME OF FAMILY PHYSICIAN:** \_\_\_\_\_ **OFFICE PHONE #** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **HOME PHONE #** \_\_\_\_\_

**I AUTHORIZE THE IRON COUNTY YOUTH CAMP TO CONSENT TO EMERGENCY MEDICAL TREATMENT OF THE CAMPER, NAMED ON THIS HEALTH FORM INCLUDING ROUTINE CARE AND THE DISPENSING OF PRESCRIPTION MEDICATIONS AS DIRECTED AND OVER THE COUNTER MEDICATIONS AS DIRECTED.**

**Over the counter medications available at camp are as follows: (ibuprofen, acetaminophen, Benadryl, pseudoephedrine, naproxen, famotidine, Tums, cough drops, calamine lotion, hydrocortisone 1% cream, triple antibiotic ointment, solarcaine, & eucerin cream.)**

**THE CAMP HEALTH OFFICER WILL ADMINISTRATOR ALL OVER THE COUNTER MEDICATIONS  
LIST ANY OVER THE COUNTER MEDICATIONS THAT CANNOT BE ADMINISTERED TO YOUR CHILD.**

\_\_\_\_\_  
**SIGNATURE OF PARENT OR GUARDIAN**

REVISED 2024

# **BATAWAGAMA** IRON COUNTY YOUTH CAMP

## **PARENT AND CAMPER INFORMATION**

### **HELP US TO ACCOMMODATE YOUR CHOICE FOR YOUR WEEK AT CAMP**

- Return your Registration Form and Health Form as soon as possible.
- Campers must sign “Camper Pledge” on the back of the Registration Form.
- Applications will be processed on a first received basis.
- Confirmation to the week or weeks at Camp will be sent by e-mail.
- Applications for Camp will be accepted until all weeks are filled.
- You and your friend must have the same first and second choices for week/weeks you wish to attend.

### **CAMPER FEES for the 2024 BATAWAGAMA CAMPING SEASON**

**THE WEEKLY CHARGE FOR A CAMPER WHO IS A PERMANENT-RESIDENT OF IRON COUNTY IS \$165**  
(includes a \$15 camp canteen book) and any unused portion will be refunded at the end of the week.  
**THE WEEKLY CHARGE FOR A CAMPER WHO IS NOT A PERMANENT RESIDENT OF IRON COUNTY IS \$365**  
(Includes a \$15 camp canteen book) and any unused portion will be refunded at the end of the week.

Children who have been permanent residents of Iron County (for at least one year before their enrollment in camp) pay in-county rates. A child who is a non-resident but has a parent who is a permanent resident of Iron County and who has court ordered custody of the said child for the summer will also pay in-county rates. A copy of the “Court Ordered Custody Document” must accompany the child’s registration form.

### **PAYMENT OPTIONS**

**OPTION #1. Registration fee** can be paid by credit card, debit card or e-check at time of online Camper Registration on the official Camp Batawagama website: [www.campbatawagama.com](http://www.campbatawagama.com).

**OPTION#2. Registration fee** can also be paid in full to the: **Iron County Youth Camp** with a check or money order. Download and mail the Registration Form, Health Form, and Payment to:

**Iron County Youth Camp**  
909 Pentoga Trail,  
Crystal Falls, Michigan 49920

### **CANCELLATION INFORMATION**

If a cancellation notice arrives to the camp office 30 days prior to the camp session, all payments (Less \$50) for each week paid will be refunded.

If a cancellation notice arrives to the camp office less than 30 days prior to camp session, all payments (Less \$100) for each week paid will be refunded.

### **HEALTH FORM AND MEDICATION INFORMATION**

Prescription medications must be in original, unopened containers. Epi-Pens and inhalers must have prescriptions with them. Over the counter medication must be in a new, unopened containers. All medications should be placed in a zip lock bag with the camper’s name on the bag. All medications must be turned in to the camper’s counselor by the parent/guardian at time of arrival on Sunday.

**NO DOGS/PETS ARE PERMITTED ON CAMPGROUNDS.**

**SUNDAY CAMPER ARRIVAL TIMES AT CAMP**

(Central time)

**CAMPER'S AGE GROUP (9----12) ..... ARRIVAL@ 2:00 PM**

**FAMILY W/MULTIPLE AGES..... ARRIVAL@ 200 PM**

**CAMPER'S AGE GROUP (13---16) ..... ARRIVAL@ 3:00 PM**

A youth camp staff member will meet each car at the camp entrance on Sunday at your designated camper arrival time. Parents and camper will be directed to their assigned section/cabin area. Parents will be allowed to help camper to their cabin and meet with the cabin counselor.

**SATURDAY CAMPER PICK-UP TIMES AT CAMP**

(Central time)

**CAMPER'S AGE GROUP (9----12) ..... ARRIVAL@ 10:00 AM**

**CAMPER'S AGE GROUP (13--16) ..... ARRIVAL@ 10:30 AM**

**FAMILY W/MULTIPLE AGES..... ARRIVAL@ 10:30 AM**

**THINGS TO BRING TO CAMP**

It is recommended that you bring the following: adequate clothing, toilet articles, towels, bedding (blankets, sheets, pillow, and extra sheet (to cover the rubberized mattress), sleeping bag for overnights, swimming suit, water shoes, and old shoes that can be worn in the lakes or rivers. Some nights are cool, and a sweatshirt or jacket comes in handy. Rain gear, extra shoes, and socks (for hiking), sunscreen, tick and/or insect repellent, hat or visor and water bottle, are all extra but useful. It is advisable to bring a long sleeve shirt, long pants, long socks for hiking in the woods.

**THINGS NOT TO BRING TO CAMP**

**Campers are not permitted to have radios, cellular phones, smart watches, CD players, iPods, or electronic games of any type. Campers are not allowed to bring knives or hatchets.**

Please do not send any food, candy, gum, pop, etc. Food items or candy that are mailed to a camper will be held in the office until the camper goes home on Saturday. Only disposable camera will be permitted. Camp provides three complete and wholesome meals to all campers each day. There is no need to send food or candy to campers. Campers have a canteen book and can purchase small quantities of sweets and craft supplies during the week. Food and candy in the cabins invite unwanted critters that can be very destructive to personal belongings and cabin facilities.

**CAMP ACTIVITIES ENJOYED AT YOUTH CAMP**

Some activities that campers can expect to enjoy while at camp are swimming, boating, canoeing, kayaking, windsurfing, sailing, paddle boarding, nature study, crafts, ukulele lessons, fire building, outdoor cooking, overnighting, folk dancing, skit night, archery, jump roping and field games.

**MAIL SHOULD BE SENT TO CAMPER BEFORE WEDNESDAY TO ARRIVE BY FRIDAY.  
NO MAIL DELIVERY ON SATURDAY.**

CAMPER'S NAME  
CABIN #  
IRON COUNTY YOUTH CAMP  
909 PENTOGA TRAIL  
CRYSTAL FALLS, MICHIGAN 49920

**"Lose yourself in the solitudes of nature... only to find yourself... in good company."**