



BATAWAGAMA

2026 IRON COUNTY BAND CAMP

Date Received _____
\$ _____

NAME OF CAMPER: _____, _____ SEX: _____
(last) (first)

ADDRESS: _____ CITY _____ STATE _____ ZIP _____

NAME OF SCHOOL ATTENDED IN 2025-2026: _____ GRADE IN 2025-2026: _____

NAME OF BAND DIRECTOR: _____ INSTRUMENT PLAYED: _____
(Percussion should specify the instrument played.) & (Baritone players should specify treble clef or bass clef.)

NAME OF PARENT/GUARDIAN: _____ PHONE #: _____

EMAIL OF PARENT/GUARDIAN: _____

Any child, regardless of race, sex, color, creed, or origin who has completed the 7th grade up to completing the 12th grade in 2026 is eligible for acceptance into to the 2026 Iron County Band Camp.

The 2026 BAND CAMP SHIRT will be available to purchase on Sunday. There is no obligation to purchase a shirt.
Adult Sizes Only - Size of T-SHIRT _____

REGISTRATION FEE FOR THE 2026 IRON COUNTY BAND CAMP

The weekly charge for a camper who is a PERMANENT-RESIDENT of Iron County is \$250
The weekly charge for a camper who is NOT a PERMANENT-RESIDENT of Iron County is \$500

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 parents have 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.

TWO OPTIONS FOR REGISTERING and PAYMENT FOR THE IRON COUNTY BAND CAMP

OPTION #1. Register online with a credit card payment and submit starting on January 1, 2026.
OPTION #2. Download the Registration Form from the campbatawagama.com website. Fill out the Registration Form and include a check or money orders made out and mailed to the:

IRON COUNTY YOUTH CAMP at 909 Pentoga Trail, Crystal Falls, MI 49920

Registration fee (less \$50) will be refunded if the cancellation notice arrives 30 days prior to Band Camp.
Registration fee (less \$125) will be refunded if the cancellation notice arrives in less than 30 days prior to Band Camp.

2026 IRON COUNTY BAND CAMPERS should plan to arrive at Camp on
June 21, 2026 between 2:00 PM and 4:00 PM. (Central Time)

(Please read additional information and sign the Camper pledge on the back of this registration form.)

The Iron County Band Camp
Has been part of the Iron County Youth Camp Summer Program since 1955.

BATA-WA-GAMA

IRON COUNTY BAND CAMP 2026 REGISTRATION INFORMATION

**TOTAL COST FOR IRON COUNTY RESIDENT IS \$250.
TOTAL COST FOR NON-IRON COUNTY RESIDENT IS \$500.**

ANY CHILD, REGARDLESS OF RACE, SEX, COLOR, CREED, OR NATIONAL ORIGINS WHO IS ENROLLED IN GRADES 7TH-12TH
DURING THE 2025-2026 SCHOOL YEAR IS ELIGIBLE FOR ENROLLMENT AT THE IRONCOUNTY BAND CAMP.

IRON COUNTY BAND CAMP POLICIES

(THIS SECTION IS FOR CAMPER AND PARENTS/GUARDIANS)

MEDICAL CARE

Michigan State Law requires that all campers provide the Camp with their health history and with the 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 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:** _____

CAMPERS MUST SIGN THE CAMPER PLEDGE.

A camper mailing their Registration Form and Health Form will be notified by e-mail to the week/weeks they are assigned.

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:** _____

BAND CAMPERS SHOULD PLAN ON ARRIVING AT CAMP BETWEEN 2:00 AND 5:00 PM.

(CENTRAL TIME)

A YOUTH CAMP STAFF MEMBER WILL MEET EACH CAR AT THE CAMP ENTRANCE ON SUNDAY AND DIRECT PARENTS AND CAMPERS TO THE DESIGNATED SECTION AND CABIN ASSIGNED TO EACH GRADE LEVEL.

PARENTS WILL BE ABLE TO HELP CAMPER MOVE INTO THEIR CABIN AND MEET WITH THE CABIN COUNSELOR.



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 ST COVID VACCINE	
MUMPS		RUBELLA		2 ND 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 2026



IMPORTANT!
2026
IRON COUNTY BAND CAMP
CAMPER & PARENT INFORMATION

* **REGISTRATION:** All band students making application to attend the 2026 Band Camp must complete the registration form, health form and submit with full payment.

TWO OPTIONS FOR REGISTERING and PAYMENT

OPTION #1. Register online with a credit card payment and submit Registration and Health Forms online.

OPTION #2. Download the Registration Form from www.campbatawagama.com. Fill out the Registration Form and Health Form and mail with check or money order (Payable to ICYC) for full payment to: Iron County Youth Camp - 909 Pentoga Trail. Crystal Falls, MI 49920

* **ACCEPTANCE:** All accepted students (will be notified by a postcard and by email.) Campers should plan to arrive at the camp between 2:00 PM and 4:00 PM (*Central Time*) on Sunday, June 21st. Campers may begin moving into their cabins during this time. A letter will notify students not accepted.

* **HEALTH EXAMINATION:** The Health Form (found at on-line: www.campbatawagama.com) is required. It should be filled out by parent or guardian. A physical examination by a physician is not required. Please notify the Youth Camp Administration if the camper has had any contagious disease during the three week period previous to 6/21/2026. Submit on-line or mail the completed Health Form with your Registration Form to: Iron County Youth Camp - 909 Pentoga Trail - Crystal Falls, MI 49920.

* **MUSIC. INSTRUMENTS AND RELATED MATERIALS TO BRING:** Bring your instrument or instruments and percussionists please bring your own mallets etc.

* **BAND ASSIGNMENTS:** 7th and 8th graders will play in the Gama Band. 9th, 10th, 11th and 12th graders will play in the Bata Band. 9th Graders could play in either the Gama or the Bata Band depending on instrumentation.

* **CLOTHING AND PERSONNEL ITEMS TO BRING:** Girls will need a white blouse and a dark skirt or pants and boys will need a white shirt and dark slacks, for the concert. You will need to bring your own bedding, an extra fitted twin sheet for a mattress, or sleeping bag, pillow, towels, soap, toothbrush and toothpaste. We also recommend that you bring warm clothing in the case of cool weather or rain, and a swimsuit, beach shoes and appropriate clothing for warm weather.

* **The BAND CAMP FACULTY CONCERT: Batawagama's FRIENDS HALL at the Iron County Youth Camp**
Thursday evening, June 25 at 7:30 PM (*Central Time*) Everyone is invited.

* **The BAND CAMP STUDENT CONCERT : FOREST PARK SCHOOL Gymnasium in Crystal Falls, Michigan**
Saturday Afternoon, June 27 at 4:00 PM (*Central Time*) Everyone is invited

* **CAMPER PICK UP:** All camper belongings are picked up on Saturday, June 27, between **NOON & 2:00 PM(*Central Time*)**. All campers are picked up and leave for home directly after the conclusion of the Concert (approximately 5:30 PM) in Crystal Falls at the Forest Park School, Eddie Chambers Gymnasium.

* **VISITORS DURING THE WEEK:** The schedule is a very full one and no time is set aside for visitors in Camp unless they are parents of campers on business. If that is the case, please call the Camp before arrival: (906) 265-4476.

IRON COUNTY BAND CAMP REGISTRATION INFORMATION

REGISTRATION FEE FOR THE 2026 IRON COUNTY BAND CAMP

The weekly charge for a camper who is a PERMANENT-RESIDENT of Iron County is \$250. The weekly charge for a camper who is NOT a PERMANENT-RESIDENT of Iron County is \$500.

- * A camper who is a Permanent Residents of Iron County must be a resident of Iron County for at least one year before their enrollment in camp.
- * A camper who is a Non-Permanent Resident but 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 camper's Registration Forms and must be mailed to: Iron County Youth Camp - 909 Pentoga Trail, Crystal Falls, MI 49920.
- * **SCHOLARSHIPS:** Students receiving Scholarships to Band Camp from their Band Directors, Band Boosters, Musicale, etc. must indicate the amount of the scholarship on their Band Camp Registration form. Unfortunately, we can not accept partial payment with the on-line credit card payments. Band campers receiving a scholarship must return their registration form by mail with a check or money order for the remainder of their total required fee and indicate the amount and the source of the scholarship on their registration form.

- * **REGULATIONS:** Campers are **NOT** permitted to bring into camp or possess any cigarettes, alcohol, or drugs of any kind. If there is possession of any of the above, the camper will be asked to leave camp. Campers are **NOT** permitted to bring into camp or possess cell phones, smart watches, beepers, or any electronic devices. Only disposable cameras are allowed in camp. Campers are **NOT** permitted to drive themselves or leave a vehicle at camp.
- * Dogs and pets are **NOT ALLOWED** on camp property. If you bring a pet to camp, your pet must remain in your vehicle.
- * **MEDICATIONS:** ALL MEDICATIONS MUST BE IN A CLEAR ZIP-LOCK BAG WITH THE CAMPER'S NAME!
 1. Bring only the exact quantity of medication needed for the week at camp.
 2. All medications must be in their original container with original prescription label (including INHALERS.)
 3. Epipens and inhalers must have prescription with them.
 4. Over the counter medications must be in a **NEW and UNOPENED CONTAINERS.**
 5. All medications must be turned into the camper's counselor when the camper arrives in camp on Sunday.
 6. All medications will be kept in the Dispensary and dispensed only by the Camp Health Officer.

* **CORRESPONDANCE:** LETTERS & PACKAGES MAIL TO:

Camper's Name - Cabin #
Iron County Youth Camp
909 Pentoga Trail
Crystal Falls, MI 49920

* **LETTERS & PACKAGES** should be sent to camper by **MONDAY** to arrive in Camp by **FRIDAY**. NO MAIL is delivered to Camp on Saturday.

Questions prior to Camp: contact Brian Schulze by email: icyc@iron.org

RETURN REGISTRATION AND HEALTH FORMS AS SOON AS POSSIBLE.
REGISTRATION FORMS WILL BE PROCESSED IN THE ORDER THAT THEY ARE RECIEVED.

*The Iron County Youth Camp is owned by the County of Iron and is operated under the jurisdiction of the County Commisstoners.
The Iron County Youth Camp is licensed to operate by the State of Michigan.*