


Blessed Beyond Measure



Music by
our Bible
Colleges!

115 Franklin Ave. Ext.
Binghamton, NY
\$55 Pre-Registration
(up to a week before)
You may register online at our
Conference Youth Page
www.pilgrimholinesschurch.org

Luke 6:38

Binghamton
Pilgrim Holiness
Youth Camp

July 29-Aug. 1



Rev. Daniel Edwards

THE BIBLE BOWL

This year's Youth Camp theme is "**Blessed Beyond Measure**", and we will be studying from the Sermon on the Mount (Matt. 5-7).

General Information

Please remember to bring the following items to camp this year:

- Pillows, sheets, and blankets or sleeping bags.
- Extension cord
- Towels, washcloths, soap, shampoo, toothbrush, toothpaste, etc.
- Clothes – both everyday clothes and some dress clothes for the evening services and the banquet.
- A jacket, in case of wet or cool weather.
- Your Bible!
- A baseball glove.
- Your musical instrument(s).
- Money for the snack bar!
- All of the friends you can round up!

Registration & Other Information

Youth camp is intended to be a special time of friendship, spiritual growth, and worship for young people ages 12–19. (Other ages may be granted special exception) Every young person who attends must be registered.

Pre-registration cost is \$55 per person/\$60 @ the door. **You can mail this in or come with a signed registration (from parents or guardian) to camp. We recommend \$30 per adult.** These fees include meals and lodging.

Send your complete registration form, and the accompanying payment, to:

Rev. Jason Morford, Treasurer
4172 St. John Dr.
Syracuse, NY 13215



Get all the latest Youth news from our Facebook Page [g É Ö Ã ? à Ö É Ü μ ö ö](#)

Rules for Youth:

1. I will participate in the Youth Camp program as planned. I will attend all services and activities, and will cooperate with my team leaders and other team members.
2. I will show respect to all individuals in authority and to all facilities on the youth camp grounds. I will not leave the Binghamton Youth Camp facility at any time, unless properly excused by the Camp Director, Rev. Joel Byer.
3. I will always show Christian etiquette.
4. I will dress modestly at all times. Girls must wear dresses or skirts of sufficient length to cover the knees, whether sitting or standing. They must not be fitting or have slits. Both guys and girls are to have shirts with sleeves. Guys are to wear long pants or jeans. Both guys and girls are to practice the principle of simplicity in appearance. (Tim. 2:9; 1 Pet. 4:3)
5. I will retire to my room and will be in bed as instructed.
6. I will use cell phones wisely.
7. I will not fraternize with the opposite sex.
8. I agree that any failure on my part to comply with these rules is just cause for my dismissal from Youth Camp.

Schedule

Monday, July 29

- 4 – 6:30 p.m. Camper Registration
- 6:30 p.m. Special Music
- 7:00 p.m. Evening Service
- 9:00 p.m. Snacks, Assignments, and Prayer
- 9:30 p.m. Afterglow

Tuesday, Wednesday...

- 7:00 a.m. Rise and Shine
- 7:30 a.m. Breakfast
- 8:00 a.m. Work Detail
- 8:15 a.m. Team Activity
- 9:00 a.m. Head to Chapel
- 9:15 a.m. Special Music
- 9:45 a.m. Youth Topics
- 10:30 a.m. Bible Bowl
- 11:30 a.m. Choir Practice
- 12:00 p.m. Lunch
- 1:00 p.m. Activities (Softball, Volleyball, Soccer, Dodgeball, Relay)
- 5:00 p.m. Supper
- 6:30 p.m. Special Music (All evening services are open to the public)
- 7:00 p.m. Evening Service
- 9:30 p.m. Afterglow, Team Prayer
- 11:00 p.m. Lights Out

Thursday, Aug 1

- 7:30 a.m. Rise and Shine
- 8:00 a.m. Breakfast
- 8:30 a.m. Obstacle Course/Team Assignments
- 9 a.m. – Youth Topics
- 10 a.m. Water Games
- 12:00 p.m. Lunch
- 12:30 p.m. All Star Team vs. Staff (Softball/Volleyball)
- 4:30 p.m. Banquet
- 7:00 p.m. **All Campers Must Be Off The Grounds!**

Registration Coupon

Load your van up!! Any church bringing 10 or more young people to Youth Camp 2019 will receive a 10% Discount on the total cost of registration!

Pilgrim Holiness Youth Camp/Convention

Registration and Health Form (fill out back of page as well & feel free to copy!)

(Please Print in black or blue ink)

(First)

(Last)

Date: ___/___/___ Camper Name: _____

Street: _____ City: _____ State: _____ Zip: _____

Phone # (____) ____ -- _____ Email: _____ Age: ____ DOB: ___/___/___

Male: ___ Female: ___ Church: _____ Pastor: _____

Parent(s) or Legal Guardian: _____

Emergency Contact: _____

Emergency Contact Phone # (____) ____ -- _____

SIGNATURES FOR CONSENT & RELEASE

This health history is correct, so far as I know, and the person herein described has permission to participate in all prescribed activities, except as noted by me.

I hereby give permission for my child _____ to attend Youth Camp or Convention. In case of minor illness or injuries to my child, I hereby give permission to the camp staff to provide care and treatment. In case of a medical emergency, I will stand by every effort to provide care and treatment. If I can't be reached, I hereby give permission to the physician or hospital, selected by the Youth Director, to perform x-rays, routine test and treatment for the health of my child, to hospitalize my child, to order injection, anesthesia, and/or surgery for my child.

I UNDERSTAND AND HEREBY AGREE TO ASSUME ALL OF THE RISKS WHICH MAY BE ENCOUNTERED ON SAID ACTIVITIES, INCLUDING ACTIVITIES PRELIMINARY AND SUBSEQUENT THERETO.

I do for myself, and my child, heirs, and assigns, irrevocably and unconditionally release and acquit Pilgrim Holiness Church of NY, Inc. and its agents, employees, and volunteers from all liability, actions, causes of actions, claims, expenses, obligations, and damages, which I now have or may arise in the future, in connection with my child's participation in the activities of the convention, or in any other associated activities including, but not limited to property, injury, or death.

I also consent and give permission for the use of photographs and video clips of my child taken at the camp to be used in the promotion of Pilgrim Holiness Church of NY, Inc.

I also understand and agree that my child may be sent home at the discretion of the camp youth director or camp nurse.

I expressly agree that this release, waiver and indemnity agreement is intended to be broad and enforceable under the law of the State of NY, and that if possible, it is agreed that the balance shall notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto.

I further state that I HAVE CAREFULLY READ AND UNDERSTAND THE FOREGOING RELEASE AND KNOW THE CONTENTS HEREOF AND SIGN THIS RELEASE AS MY OWN FREE ACT b c b b Y I h d U [Y

I understand this is a legally binding agreement. I have read the Rules for Youth, and I will ab completely

_____/_____/_____
Parent's or Guardian's Signature Date

_____/_____/_____
Youth's Signature Date

For more info call Rev. Joel Byer at (570)-836-2090 or Email PHYregistrar@yahoo.com

Medications/Health History

All medications must be in a correctly labeled original container and given to the nurse at check-in time. NO MEDICATIONS (PRESCRIPTION OR OVER-THE-COUNTER) WILL BE ALLOWED IN THE CABIN UNLESS AUTHORIZED BY THE NURSE.

Please Include an Official up to date copy of your child's immunization records for our files.

Name of Medication _____ Qty(dose) _____ Times Per day _____

Purpose of Medication _____

Name of Medication _____ Qty(dose) _____ Times Per day _____

Purpose of Medication _____

Name of Medication _____ Qty(dose) _____ Times Per day _____

Purpose of Medication _____

Are there any over-the-counter, non-prescription medications or ointments that can be given to your child for-- Minor aches and Pains: ___ Tylenol ___ Advil ___ Ibuprofen

Other _____

Allergies: ___ Benadryl _____ Other _____

Health History:

- | | |
|-----------------------------------|----------------------------|
| _____ Frequent Ear infections | _____ Heart Defect/Disease |
| _____ Convulsions | _____ Diabetes |
| _____ Bleeding/Clotting Disorders | _____ Epilepsy |

- | | | |
|--------------------|---------------------|------------------------|
| Allergies | _____ Hay Fever | _____ Poison Ivy, etc. |
| Allergic Reactions | _____ Insect Stings | _____ Penicillin |
| _____ | _____ Other Drugs | _____ Peanuts |
| _____ | Other Foods | Other _____ |
| | _____ | |
| | _____ | |

Diseases:

- | | |
|-------------------|----------------------|
| _____ Chicken Pox | _____ German Measles |
| _____ Asthma | _____ Measles |
| Other _____ | _____ Mumps |