

2024 Mighty Missionary Camp

Trinity Lutheran Church-Springfield, MO

May 28- June 1, 2024

Volunteer Information

(Just completed 9th grade through adults)

Volunteers are needed to go to camp on Tuesday, May 28 around 12:00 p.m.

Please Print All Entries

First Name _____

Last Name _____

“Preferred Name” _____ Gender M F

Circle One: High School Adult

Circle One: Overnight Volunteer Daytime Volunteer

Overnight volunteers' shirt is complementary

Shirt Size: S M L XL XXL

Phone Number (____) ____ - _____

Home Address: _____

City _____ State: _____ Zip _____

High School Youth Only

Parent/Guardian Names: _____

Parent Work Phone (____) ____ - _____

Mom's Cell (____) ____ - _____

Dad's Cell (____) ____ - _____

Emergency Medical Information-

Please Print all Entries

Emergency Contact: _____

Emergency Contact Phone # (____) ____ - _____

Medical Insurance Provider _____

Policy # _____

Please answer the following with yes or no (If yes, please elaborate on lines at the bottom of the page)

- Y N Are you on any medication on a regular basis?
- Y N Do you have any allergies (including food allergies)?
- Y N Do we have permission to give your child Tylenol or Motrin over-the-counter stomach remedies if the need arises?
What is the date of your last tetanus shot? _____

Detail Any Medication/Allergies or other Concerns

Payment for Overnight High School Volunteers is Due with Registration:

Fee postmarked on or before May 12th\$90.00

If postmarked after May 12th\$100.00

+ Add'l Gift to Mighty Missionary Camp \$ _____

Payment Enclosed Now = \$ _____

(Please make checks payable to **Trinity Lutheran Church**)

Contact the church about the Camper Scholarship Program

Your non-refundable fee is used to purchase supplies for your camp event. It also pays for 3 nights of lodging at the camp facility. Rock climbing, rappelling, zip line, and swimming are included in the fee. Each overnight volunteer will get a shirt.

For Information call Camp Director, Ahren Love and Angela Love at 417-229-2822

Registration and full payment due by May 14, 2024

Please give this form with your payment to Angela Bruton or mail this form:

Trinity Lutheran Church c/o M&M Camp
1415 South Holland, Springfield, MO 65807

Liability Statement

I hereby give my child permission to attend Mighty Missionary camp, sponsored by Trinity Lutheran Church, Springfield, Missouri. My child has permission to take part in all camp activities, and I agree that the Mighty Missionary Camp or its personnel will not be held responsible for any accidents arising there from. I hereby authorize Mighty Missionary Camp authorities to use local hospitals and/or doctors if any emergency illness/injury arises.

Preferred Hospital: _____

Family Doctor: _____

Doctor's Phone: _____

***Signature below indicates you have read the liability statement and all camp rules will be followed**

Volunteer Signature: _____

Volunteers under 18, Parent/Guardian Signature

Date _____

For Office Use Only:

Date Received _____ Check Number/Cash _____ Amt Pd _____