



# Northern Michigan Christian Camps

Faith, Fellowship, and Friendship for Life

N3023 Fumee Lake Drive  
Iron Mountain, MI  
49801

Dear Camper Parents and Guardians,

I'm writing to let you know that registration for Summer Camp 2024 is officially open and available on our website, [www.nmccamps.com](http://www.nmccamps.com). I'm also writing with information on this year's camp session. We have a great camp session planned and we hope you can be there to share in the fun and memories.

## Camp Details

- **When:** June 16-22 (Sunday to Saturday)
- **Where:** [Clear Lake Education Center \(8025 North Clear Lake Road, Manistique, MI 49854\)](#)
- **Ages:** Camp is open to campers age 10-18
- **Questions:** Contact us at [nmccamps@gmail.com](mailto:nmccamps@gmail.com) or (906) 282-2304
- **Registration:** Register for camp at [www.nmccamps.com](http://www.nmccamps.com)

The Clear Lake Education Center is handicap accessible and we can accommodate food or other allergies.

## Camp Costs and Registration Details

We have made two changes to our registration procedures:

- 1. Payment options:** We recognize that the cost of registering multiple campers at the same time may be burdensome. To address this issue, we now offer the option to register for camp and pay later. Go to: [www.nmccamps.com](http://www.nmccamps.com) and use the "Register Online and Pay Later" option. Your registration costs will not be due until you arrive at camp. And, as always, need-based financial assistance is available for registration fees.
- 2. Registration timing:** To help us better prepare for the camp session, we are introducing different registration costs based on when you register. If you register before May 20, the registration fee remains \$300 per camper. After May 20, the registration fee increases to \$400 per camper unless you are registering first-time campers.



## What to Expect



Never been to camp before? Here's what to look forward to. Campers live together in cabins with two camp counselors. Everyone is welcome at camp and new campers will start forming friendships the moment they arrive and meet their counselors and cabin-mates.

We start each day with a hot, home-cooked breakfast, followed by a learning session where we explore what the Christian faith teaches about how to live our lives. This year's learning sessions will explore the Book of Hebrews and what it teaches us about how to live our lives as Christians. Our learning sessions are a "Choose Your Own Adventure" story, where campers and counselors

participate in a live-action adventure with twists and turns that result from their choices.



In the afternoon, we head to the ballfield for recreation time, where we have lively games of capture the flag, kickball, and other games. After we've worked up a sweat during recreation time, we move to Clear Lake for swimming or canoeing. We also have arts and crafts time each day where we paint, photograph, and create craft projects that reflect each learning session's materials.

Finally, after a delicious dinner, we gather for a worship service, often around the campfire with singing and s'mores. In addition to these regular activities, each day at camp has a special event, like our Talent Show, the "NMCC relays" pitting staff against campers in a series of fun and silly events, and a cookout at the campfire.

You can see lots of photos of camp activities and the Clear Lake Education Center at:

[www.facebook.com/NMCCamps/photos](http://www.facebook.com/NMCCamps/photos)

## Camper Drop-Off and Pick-Up

Camp begins on Sunday, June 16. You can drop campers off from 3:00 p.m. to 4:00 p.m. Eastern Time at the Clear Lake Education center. Please let us know if you cannot drop off campers at the indicated times. Camp concludes on Saturday, June 22. Campers need to be picked up by 12:00 p.m. Eastern Time.

## What to Bring to Camp

- sleeping bag and pillow (sheets are also a good idea in case of warm weather)
- any required medication in the original container issued with frequency and dosage indicated
- all toiletries: soap, shampoo, toothbrush, toothpaste, deodorant, etc...
- swimsuit
- warm clothing and rain gear
- 2 or more pairs of shoes
- clothes that can be used in our "messy games", which involve colored slime
- two towels, one for swim time and one for the showers
- flashlight
- insect repellent
- any items for the Camp Talent Show (e.g., musical instruments, costumes, etc...)
- dirty clothes bag/container

## Directions to Clear Lake

*From M-28*

Head south on M-94 for 4.5 miles. Turn left onto Clear Lake Road and follow the driveway for 5 miles to the camp entrance (look for a large metal gate and signs). Turn right and follow the camp driveway to the circular turnaround.

*From US-2*

Head north on M-94 for approximately 25 miles. Turn right onto Clear Lake Road and keep left at the fork. Follow Clear Lake road to the camp entrance (look for a large metal gate and signs). Turn left and follow the camp driveway to the circular turnaround.

We will post NMCC signs at the turn for Clear Lake Road and the camp driveway.



## **Other Information**

If you or potential campers you know need assistance in order to attend camp, please contact us (906) 282-2304 or nmccamps@gmail.com. Camp will be a blast this year, with classic camp traditions like cookouts, crafts, canoeing, the camp relays, capture the flag, and s'mores, plus lots of great new activities as well. If you have any questions about camp, please contact us. Thank you for being a part of our camp family and we hope to see you at Clear Lake on June 16.

Sincerely,

Mahlon Collins  
Camp Director



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## Camper Information

Camper Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent/Guardian Phone: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

Alternative Contact Name: \_\_\_\_\_ Alternative Contact Relationship: \_\_\_\_\_

Alternative Contact Phone: \_\_\_\_\_ Alternative Contact Email: \_\_\_\_\_

Camper Gender: \_\_\_\_\_ Camper Birthday: \_\_\_\_\_ Finishing Grade: \_\_\_\_\_

Age on 06/20/2021: \_\_\_\_\_

Camper T-shirt size: \_\_\_\_\_

First time camper: yes    no

Seeking financial assistance: yes    no

Print Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

## Registering for Camp

Complete the health history and authorization forms on the following pages and enclose payment to complete your registration for camp. The cost to register is \$300 per camper and you may pay this amount in full or include a \$25 deposit and pay the remainder when you arrive at camp. Checks should be made out to "Northern Michigan Christian Camps". **Please submit your registration by June 1.** This form and those on subsequent pages are fillable in pdf reading programs, such as Adobe Acrobat. Need-based financial assistance is available to offset some or all of the registration cost. Please contact us at [nmccamps@gmail.com](mailto:nmccamps@gmail.com) or (906) 282-2304 if you are seeking financial assistance. Mail your completed registration packet along with payment to:

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You may also register campers online at [www.nmccamps.com](http://www.nmccamps.com) using our secure registration and payment system. Full payment is required to submit online registrations.



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## Camper Health Form

### Camper Information

Camper Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Camper Birth Date: \_\_\_\_\_ Camper Gender: \_\_\_\_\_

### Parent/Guardian (Primary Emergency Contact) Information

Parent/Guardian Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Parent/Guardian Phone: \_\_\_\_\_ Parent/Guardian Email: \_\_\_\_\_

Alternative Phone Numbers (home or work): \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Alternative Emergency Contact Information (if Primary Contact Cannot be Reached)

Alternative Contact Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Alternative Contact Phone: \_\_\_\_\_ Alternative Contact Email: \_\_\_\_\_

Alternative Phone Numbers (home or work): \_\_\_\_\_

### Current Health History and Issues

List any health conditions for the camper which the camp staff should be aware. Examples include fainting, seizures, bedwetting, high blood pressure, eating disorder, migraines, respiratory conditions, joint pain, etc... If your camper has a life-threatening condition, such as diabetes, a heart condition, severe allergies, or asthma, please provide an emergency action plan in the space below (or attach to this form).

\_\_\_\_\_

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List any allergies for this camper, including allergies to food, latex, medications, and substances in the environment.

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Should this camper's physical activity be restricted for any reason? If yes, explain here.

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List any emotional and behavioral conditions for this camper, such as anxiety, depression, anger issues, bi-polar disorder, or homesickness.

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### Medication Record

All medications must be in their original container and must come with a physician's order that clearly indicates dosage and frequency for each medication.

Medication	Dosage	Frequency
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Immunization Record

**A copy of the camper's immunization record is required for registration**

	Polio	Mumps	Diphtheria	Pertussis	Measles
Date Initial	_____	_____	_____	_____	_____
Date Booster	_____	_____	_____	_____	_____
	Rubella	Tuberculosis	Hepatitis A	Hepatitis B	COVID-19
Date Initial	_____	_____	_____	_____	_____
Date Booster	_____	_____	_____	_____	_____

## Health Care Authorization Statement

I certify to the best of my knowledge that this information is accurate and complete. This camper has my permission to engage in all camp activities, except as noted above. I give permission to Northern Michigan Christian Camps, which is licensed by the State of Michigan Department of Human Services, Bureau of Children and Adult Licensing, to provide routine health and non-surgical medical care, administer prescribed medications according to instructions, and receive over-the-counter medications, as deemed necessary by the camp health director.

Further, it is my intention that the appropriate representatives of the camp be treated as "personal representatives" for the purposes of disclosing protected health information pursuant to the privacy regulations promulgated pursuant to the Health Insurance Portability and Accountability Act of 1996. I hereby agree (pursuant to 45 CFR 164.510(b)) to the disclosure to camp representatives of the protected health information of the person herein described, as necessary: (i) to provide relevant information to the camp representatives related to the person's ability to participate in camp activities; and (ii) in the case of minors, to provide relevant information to the camp representatives to keep me informed of my child's health status. I give permission to secure emergency medical, surgical, and dental treatment for the camper named above while attending camp.

In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp to secure and administer treatment, including hospitalization, for the person named above. This completed form may be photocopied for trips out of camp. I understand that part of the camp experience involves activities and group living arrangements and interactions that may be new to my child, and that they are aware of these risks, and I am assuming them on behalf of my child. I recognize that no environment is risk-free and so I have instructed my child on the importance of abiding by the camp's rules, and my child and I both agree that he or she is familiar with these rules and will obey them. I hereby give permission to the camp to provide, seek, and consent to routine health care, administration of prescription medications, and emergency treatment and hospitalization. I also give permission for the camp to arrange related transportation. I agree to the release of any records necessary for treatment, referral, billing, or insurance purposes. In addition to the above, I acknowledge that a copy of insurance and prescription cards are required to register a camper for the camp session and I will provide these to the camp.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Media Statement

I grant permission to Northern Michigan Christian Camps, its agents, and its employees the irrevocable and unrestricted right to produce photographs and video taken of my child, myself, and members of my family while at

Northern Michigan Christian Camps for any lawful purpose including publication, promotion, illustration, advertising, trade, or historical archive in any manner or in any medium by Northern Michigan Christian Camps or the American Camp Association. I hereby release Northern Michigan Christian Camps and the American Camp Association and its legal representatives from liability for any violation or claims relating to said images or video.

Furthermore, I grant permission to use the statements of my child, myself, or my family members given during an interview or evaluation with or without my name for the purpose of advertising and publicity without restriction to time limit or geographic area. I waive my right, my child's rights, and my family's rights to any and all compensation stemming from the use of these materials.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **COVID-19 Protocols and Testing**

I certify that in the past 7 days, my camper has not been exposed to any individual known to be infected with COVID-19 and has not had any of the following symptoms:

- coughing
- shortness of breath
- fever
- chills
- muscle pain
- sore throat
- loss of taste or smell
- nausea
- vomiting
- diarrhea

I also acknowledge that my camper will be quarantined and will be required to leave the camp session if they exhibit a temperature greater 100.4°F, loss of taste or smell, or other symptoms of COVID-19 the camp health director deems a risk to the health of individuals at camp.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Northern Michigan Christian Camps may obtain COVID-19 rapid antigen tests to screen campers and staff for COVID-19 after their arrival at the camp site. Tests will be administered by the camp health director, a registered nurse who has been trained to administer the test by the State of Michigan. I hereby authorize Northern Michigan Christian Camps to administer a COVID-19 test when my camper arrives at camp and any other time during the camp session at the camp health director's discretion.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_