

Please complete the following insurance coverage information or attach a photocopy of the card's front and back to this form:

Insurance Company: \_\_\_\_\_

Employee Company: \_\_\_\_\_

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

Group Policy # \_\_\_\_\_

Policy #: \_\_\_\_\_

I hereby give consent for the above named camper to attend CrossRoads Baptist Camp. My child may participate in all camp activities. I will not hold the organization or its counselors liable in case of sickness, injury or loss of property. I give consent for my child to receive emergency medical treatment if necessary. We also agree to abide by all camp rules and regulations.

The above named caregiver shall be authorized to consent to all medical and/or surgical treatment and/or other medical procedures (including administration of anesthesia, blood transfusions, diagnostic test, etc.) for the above named child's stay at camp. This consent serves as permission for treatment by any medical facility the CrossRoads Baptist Camp and its counselors deem proper and necessary. Note: Consents are not required in emergency situations; I agree to pay for all services provided to my child while at camp.

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

\_\_\_\_\_  
Camper Signature

Please send this form along with the \$50 non-refundable deposit to:

**CrossRoads Baptist Camp**  
**3911 W Bay Ave**  
**Tampa, FL 33616**

## HOW SHOULD I DRESS FOR CAMP?

*The simple key to our dress code is modesty and distinction*

**Girls** - Skirts, dresses, and culottes of modest knee-length and proper fullness. Loose-fitting basketball shorts are acceptable. No sundresses or sleeveless tops. No walking shorts, umbros capris, or tightfitting gauchos or shirts. A one-piece, modest swimsuit and dark shirt and culottes for going to the pool and back. A good guideline to go by is long and loose.

**Boys** - Long athletic pants and t-shirts for recreation; knee-length athletic shorts may be worn on athletic field. No tank tops or inappropriate graphics or wording on clothing. Long pants and collard shirts are appropriate for evening services. Knee-length swim trunks and dark shirt are required to and from the pool. No jewelry.

## WHAT SHOULD I BRING TO CAMP?

In addition to clothing, please bring all personal items as well as bedding for bunk beds, towels, washcloths, Bible, notebook and pen. Extra spending money.

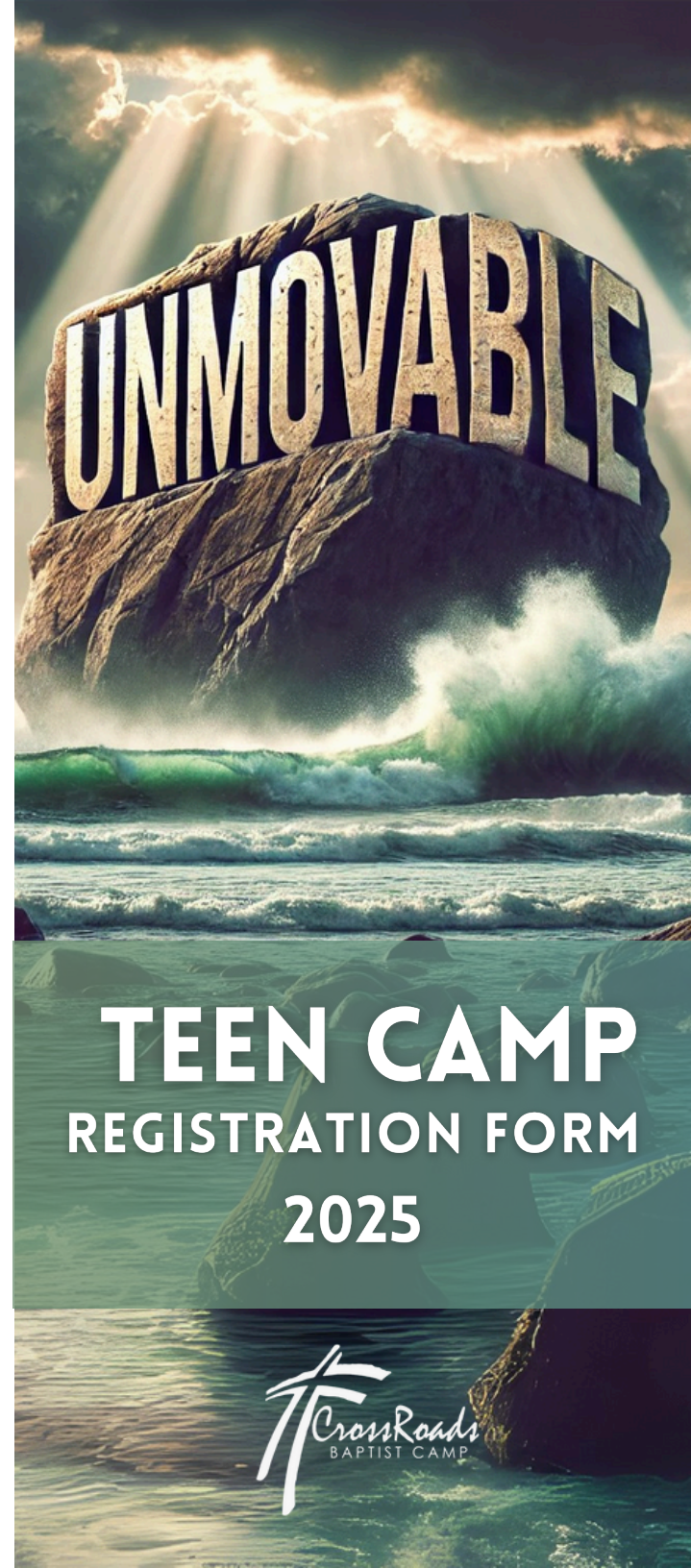
## WHAT SHOULDN'T I BRING TO CAMP?

CELL PHONES or hand-held electronic games, Smart Watches with games or cellular access, knives, firearms, fireworks, non-Christian reading material, and absolutely no tobacco illicit drugs, or alcohol in ANY form!

## USAGE OF PHONES

We do not have a phone readily available to campers - only counselors and staff. We do not encourage campers to call home because this encourages "homesickness". If an emergency occurs, parents may call the camp to speak to a church counselor.

Thank You!



**TEEN CAMP**  
**REGISTRATION FORM**  
**2025**





# CAMP DATES -

July 7-12, 2025

# CAMP COST -

\$150 Campers + reg.  
(Total = \$200)

\$100 Counselors + reg.  
(Total = \$150)

*(This special price applies to 2 counselors for every 15 campers - additional counselors pay camper price.)*

# DEADLINE -

A \$50 Non-refundable registration fee is due  
June 1st, 2025

\$65 late registration fee  
after June 1st

Make checks payable to:  
CrossRoads Baptist Camp



# SPEAKER

**Michael Jones**

Oakwood Baptist Church  
Anderson, South Carolina

# SPECIAL MUSIC



# IMPORTANT TIMES:

Registration from 1-3  
Monday, July 7th.  
Camp ends Saturday,  
the 12th at 10 am.

# CAMP ADDRESS

1305 Hwy 135 South  
Lake Park, GA 31636

# CONTACT INFORMATION

813.837.3334  
[www.crossroadsbaptistcamp.org](http://www.crossroadsbaptistcamp.org)

# REGISTRATION

Tshirt Size: S M L XL \_\_\_\_\_

Please Check Appropriate Box:

<input type="checkbox"/> Counselor	<input type="checkbox"/> Camper	<input type="checkbox"/> Female
<input type="checkbox"/> Youth Director		<input type="checkbox"/> Male

Name: \_\_\_\_\_  
First Last Name Preferred

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Day Phone \_\_\_\_\_ Cell \_\_\_\_\_

Church Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Church Email \_\_\_\_\_

Church Phone \_\_\_\_\_

Pastor \_\_\_\_\_

Youth Director \_\_\_\_\_

## Emergency Information

Parent/Guardian Name \_\_\_\_\_

Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Please list and explain any medical conditions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_