



Northern Lights Region 2026 Summer Camp Registration

Let's get ready to register!

Before starting, we suggest you read down the page to see what you'll need during registration.

Every camper must fill out a registration.

If you have questions, contact the Northern Lights Regional Office before beginning:

office@northernlightsdisciples.org

REGIONAL SCHOLARSHIPS - IMPORTANT:

- Must be pre-approved prior to registration.
- Regional scholarships for up to 50% of camper fees may be granted to those with need.
- To apply, submit a request at northernlightsdisciples.org/youth-scholarships. [scholarships](https://northernlightsdisciples.org/youth-scholarships). Wait for approval before registering.

LOCAL CHURCH SCHOLARSHIPS:

- Must be pre-approved prior to registration.
- Contact your local church pastor to find out if your church provides scholarships. Wait for approval before registering.

If you'd like to register online (preferred), you may do so at northernlightsdisciples.org/summer-camps. This may offer you a variety of benefits.

Dates, Deadlines, and Costs:

****Registration deadline for all camps is 14 days prior to start date.****

Camps will be held at both of our Disciples-connected venues:

- **Cane Ridge West Conference & Retreat Center – Lincoln, MT**

Get the Early Bird discount – \$20 off – register before June 20th.

Kids, Junior, ChiRho, CYF Camps: \$255 then \$275

- July 20-25 – Kids Camp (entering Grades 2-3): Register by 7/6 (\$255 then \$275)
- July 20-25 – Junior Camp (entering Grades 4-5): Register by 7/6 (\$255 then \$275)
- July 20-25 – Chi Rho/CYF (entering Grades 6-HS Grad '26): Register by 7/6 (\$255 then \$275)

- **Gwinwood Retreat Center – Lacey, WA**

Catch the Early Bird discount -- \$20 off -- register before June 13th:

Kids Camp: \$180 then \$200 / Junior, ChiRho, CYF Camps: \$255 then \$275

- July 13-16 – Kids Camp (entering Grades 2-3): Register by 6/29 (\$180 then \$200)
- July 13-18 – Junior Camp (entering Grades 4-5): Register by 6/29 (\$255 then \$275)
- July 13-18 - Chi Rho/CYF (entering Grades 6-HS Grad '26): Register by 6/29 (\$255 then \$275)

****Registration Deadline is 14 days prior to camp start - Don't miss out!****

****Early Bird Discount in place until one month prior to camp start (\$20 discount).****

A payment plan is offered in some cases; please see (online/credit card only).

- A deposit is required at registration.
- Family, friends, or churches may make payments along the way.
- Two weeks before camp starts, any unpaid balance will automatically be paid by the card used for the deposit. It is up to camp families to make sure payments are made in time.
- If a balance is due with less than two weeks to camp, attendance at camp may be denied.

Ready? Let's Go! Registration begins on the next page.

* Means the field is required.

Camp Session Selection

You are registering to attend (check one and fill in \$ amount):*

Check Early Bird amounts and dates above.

- Cane Ridge West: Kids Camp - \$200**
Entering Grades 2-3 this Fall
Mon, July 20th at 11 am - Thurs, July 25th at 11 am \$ _____
- Cane Ridge West: Junior Camp - \$200**
Entering Grades 4-5 this Fall
Mon, July 20th at 11 am - Thurs, July 25th at 11 am \$ _____
- Cane Ridge West: Chi Rho Camp - \$275**
Entering Grades 6-8 this Fall
Mon, July 20th at 11 am - Thurs, July 25th at 11 am \$ _____
- Cane Ridge West: CYF Camp - \$275**
Entering Grades 9-HS Grad '26
Mon, July 20th at 11 am - Thurs, July 25th at 11 am \$ _____
- Gwinwood: Kids Camp - \$200**
Entering Grades 2-3 this Fall
Mon, July 13th at 11 am - Thurs, July 16th at 11 am \$ _____
- Gwinwood: Junior Camp - \$275**
Entering Grades 4-5 this Fall
Mon, July 13th at 11 am - Sat, July 18th at 11 am \$ _____
- Gwinwood: Chi Rho Camp - \$275**
Entering Grades 6-8 this Fall
Mon, July 13th at 11 am - Sat, July 18th at 11 am \$ _____
- Gwinwood: CYF Camp - \$275**
Entering Grades 9-HS Grad '26
Mon, July 13th at 11 am - Sat, July 18th at 11 am \$ _____

Optional Sunday lodging for Cane Ridge West

- Cane Ridge West: Optional Sunday Lodging (\$30)** \$ _____

+For those wishing to arrive Sunday evening prior to Monday's camp start, lodging at CRW is an option. Cost is \$30 per person. No meals provided.

+Youth must have a parent/guardian/designated adult stay with them overnight & responsible for them until camp begins.

+For accompanying adults or others not staying for camp, MAIL A CHECK for \$30 per person (memo: "Sunday CRW") to:
Northern Lights Region, 4227 S Meridian, C615, Puyallup, WA 98373.

Space is not reserved until check is received. Checks MUST BE RECEIVED no later than two weeks to camp start.

Camper Information

What brings you to camp this year (check one)?*

- I am part of a church (church name, city?): _____
- I am a guest/friend of a camper (who?): _____
- A different connection (what connection?): _____

Is this camper already approved for a partial or full *local church scholarship*?* YES NO

If YES, amount of congregational scholarship: _____

Camper's Name* _____

Gender (check one)* _____

Pronouns _____

Camper age at time of camp* _____

Camper Date of Birth* _____

Grade entering this fall (circle one)*

Grade 1 2 3 4 5 6 7 8 9 10 11 12 Graduated in 2026

Is this the first year this camper has attended a Disciples of Christ camp?* YES NO

Family email for updates checked at least weekly.* _____

Phone Number (where the camper resides)* _____

Camper Mailing Address* _____

First Emergency Contact: Parent/Guardian with Legal Custody

Parent/Guardian First & Last Name* _____

Parent Address* _____

Preferred Emergency Phone Number* _____

Second Emergency Contact: *Only in the case that first contact cannot be reached*

First & Last Name* _____

Preferred Emergency Phone Number* _____

Relationship to Camper* _____

Alternate Pickup Person:

Provide information IF there is anyone in addition to the Parent/Guardian with Legal Custody that may pick up a camper. *Only the Parent/Guardian with Legal Custody and Approved Alternates will be allowed to pick up.* If no name is added the Parent/Guardian with Legal Custody will be the ONLY allowed person.

First & Last Name _____

Preferred Emergency Phone Number _____

Relationship to Camper _____

Insurance Information

If your camper requires medical treatment while at camp, your family's or camper's health insurance information will be used at the hospital. Please provide that information below.

No Insurance (Doctor contact information still required) The camper HAS insurance coverage

Health Insurance Carrier and/or Plan Name _____

Policy or Group # _____

Policy Holder's Name _____

Date of Birth of Policy Holder _____

Name of Camper's Primary Doctor* _____

Primary Doctor/Clinic Phone Number* _____

Camper Medical Information

This section helps volunteer staff & medical personnel know about the camper's medical needs including:

- Medications the camper will take
- Over the counter meds allowed/not allowed
- Allergies, diet, nutrition, and vaccinations
- General health questions and restrictions
- Social & Emotional Health

Medications

"Medication" is any substance taken to maintain and/or improve health, including vitamins & natural remedies. All medications are collected, stored, and distributed by either a volunteer adult with a healthcare background or other designated adult volunteer.

List ALL medications taken routinely (include over-the-counter & non-prescription). **Bring only enough to last the entire time at camp.** Keep in the original packaging/bottle that identifies the prescribing physician (if prescription), name of medication, dosage, and frequency.

Camper WILL NOT take daily medications at camp. Camper WILL take daily medications at camp.

Please list all medications, their names, dosage, and times/frequency.

Daily Medications list

Camper Name: _____

Medication 1 Name _____
 Dosage _____ Time(s) _____
 Additional information _____

Medication 2 Name _____
 Dosage _____ Time(s) _____
 Additional information _____

Medication 3 Name _____
 Dosage _____ Time(s) _____
 Additional information _____

Medication 4 Name _____
 Dosage _____ Time(s) _____
 Additional information _____

Medication 5 Name _____
 Dosage _____ Time(s) _____
 Additional information _____

Is there anything else camp staff should know about this camper's daily medication?

Additional information _____

Over-the-Counter Medications*

- Camp staff DOES HAVE PERMISSION to administer over-the-counter medications as necessary.
- Camp staff SHOULD NOT administer ANY over-the-counter medications.
- Camp staff DOES HAVE PERMISSION to administer over-the-counter medications **EXCEPT FOR:**

Brief Medical History

Please fill in the following section to help our volunteers understand your camper's medical history so they can give them the best possible care.

Allergies note: Camp attendees with chronic allergies are encouraged to start allergy medications in the weeks leading up to the start of camp and should bring allergy medication with campers to the event.

Allergy Information (check all that apply):*

- No Known Allergies
- Food
- Medicine
- The Environment

Briefly describe what the camper is allergic to, the reaction seen, and how it is treated:

Diet and Nutrition (check all that apply):*

- Camper eats a regular diet.
- This camper eats a regular vegetarian diet.
- This camper has special food needs.

Briefly describe any special food needs:

Vaccinations (check all that apply):*

Check all that the camper has been vaccinated or received booster shots for:*

- Has had NO vaccinations or boosters
- Chicken Pox
- COVID-19
- Measles
- Mumps
- Hepatitis A
- Hepatitis B
- Hepatitis C
- Positive TB Mantoux Test
- Rubella

Social/Emotional Health (check all that apply to this camper)*

- Ever been treated for attention deficit disorder or attention deficit/hyperactivity disorder?
- Ever been treated for emotional or behavioral difficulties or an eating disorder?
- During the past 12 months, seen a professional to address mental/emotional health concerns?
- Had a significant life event that continues to affect the camper's life?
- Camper is emotionally and socially stable.

Please provide a brief description for any item you checked:

General Health Information (check all that apply to this camper)*

- Camper is in general good health
- Hospitalized in last 12 months
- Had surgery in last 12 months
- Has recurrent/chronic illnesses
- Had a recent infectious disease
- Has ongoing health conditions resulting from COVID-19
- Had a recent injury
- Had/Has asthma/wheezing/shortness of breath
- Has diabetes
- Had/Has seizures
- Had/Has migraine headaches
- Wears glasses, contacts, or protective eyewear
- Had/Has fainting or dizziness in last 12 months
- Has passed out/had chest pain during exercise in last 12 months
- Had mononucleosis (mono) in the last 12 months
- Had/Has problems with periods/menstruation
- Had/Has back/joint problems in last 12 months
- Has a history of bedwetting
- Has problems with diarrhea/constipation
- Has any skin problems
- Has traveled outside the country in the past 9 months
- Has problems with falling asleep/sleepwalking/nightmares
- Has frequent nosebleeds

Additional Medical History Information may be given and can be in addition to the above check marks – for example, frequent nosebleeds does not mean the camper is not generally healthy.

Additional Medical History Notes:

Camper's Swimming Experience and Ability*

- Non-swimmer
(Wading depth only, with or without a gentle current.)
- Beginner
(Completed set of basic swimming classes and/or demonstrated ability to float and tread water. The beginning swimmer may be comfortable only in water they can touch bottom in with head above water or shallow water, with or without a gentle current.)
- Intermediate
(Completed set of intermediate swimming classes and/or demonstrated ability to float, tread water, and do basic swim strokes (breaststroke, sidestroke). The intermediate swimmer is comfortable in deep water, may not be able to touch bottom, with or without a gentle current.)
- Advanced
(Completed set of advanced swimming classes, participates in swimming sports, and/or demonstrated ability to do many swim strokes (breaststroke, sidestroke, backstroke, etc.) and basic life-saving maneuvers (float, tread water, etc.). The advanced swimmer is comfortable in deep water with or without a gentle current.)

Additional Swim Experience Notes:

If your explanation about this camper's health exceeded the space(s) above, **please use this section to provide additional information that you think is important or that may affect the camper's ability to fully participate in the camp program**, or contact the Northern Lights Regional Office at office@northernlightsdisciples.org / 253-893-7202 ext. 1.

Additional Health Information:

Is there anything else you would like us to know about your camper or their stay at camp this week?

Consent & Release (Registration will not be complete without this)

The undersigned person represents that they are the custodial parent/legal guardian of the above identified participant. The camper has my/our permission to attend the indicated camping program sponsored by the Northern Lights Region of the Christian Church (Disciples of Christ) as scheduled during July 2026.

- In case of medical emergency, I/we understand that every effort will be made to contact a parent or guardian of the camper. In the event I/we cannot be reached, I/we hereby grant permission to camp staff to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for the child while attending camp. I/we further release the camp directors, volunteer counselors, onsite staff, and the Christian Church (Disciples of Christ) in the Northern Lights Region from responsibility and liability for any accidents or illnesses occurring during camp. I/we also authorize the camp director or medical supervisor to dispense non-prescription drugs (i.e. Tylenol; ibuprofen) if a situation warrants, unless otherwise noted.
- I/we understand that the camping experience grows in intensity as the week progresses. I/we recognize that missing any part of the week compromises my child's experience of intentional Christian community and affects both my individual child and the camp community as a whole. I/we know that the demands outside this camp event may be in conflict with the commitment to spend a week apart in Christian camping, and I/we have chosen to have my child spend a week at camp uninterrupted. Thus, **I/we agree to not text or call** my child/youth during the week of camp. I/we acknowledge that I/we will be personally responsible for picking up my youth from the event if they violate any part of the covenant below.
- **No camper phones/electronic communication devices allowed at Disciples camps at GWINWOOD:** I/we understand that Northern Lights Region camps at Gwinwood Retreat Center aim to create an immersive and spiritually enriching experience, and that a no-cell phone (and other electronic communication devices) policy ensures full engagement in real-life activities, builds meaningful connections, allows a child/youth's brain to rest and reset, and embraces the beauty of God's creation and natural surroundings. Thus, **I/we agree to leave all electronic communication devices at home.** I/we understand that campers who fail to adhere to this and bring devices to camp must voluntarily turn them over at check-in, and that they will be securely stored until the end of the week. Repeated failure to follow the no-device policy will result in a child/youth being sent home from camp without refund.
**An exception to the policy is phones used for medical/medication alerts.* In this case, campers are required to turn over devices at check-in; camp staff will support timely medication administration. In times of emergency or appropriate need, provisions will be made to address situations effectively. In case of a genuine emergency where a camper needs to contact family, they will be granted permission to use a phone under the supervision of a staff member. Campers may approach a staff member to request use of a phone. Staff will assess each situation and provide assistance accordingly.
I/we accept this no-device policy and will adhere to its guidelines.
**Camps at Cane Ridge West may have assigned periods of quiet time when phone use for music is allowed.*

By checking this box I/we state I/we have BOTH read and agree to the Consent & Release information above.*
Checking this box represents your digital signature and authorization. You cannot register for camp without accepting the "Consent and Release" information.

Photograph, Video Recordings, and/or Livestream Permission

With your permission, the Region's program staff and our volunteer camp staff (counselors and directors) may photograph or video record your child for the express purpose of promoting the Region's Summer Camp program or the Youth and Children's Ministries program through print media, digital media, and/or internet platforms. With your permission, Livestream technologies, such as Zoom or Facebook Live, may be used to connect programming at camp sessions running concurrently in different locations, during which time your child may be in view of the camera. Further, the staff of the facilities the Region rents for the Summer Camp program (Gwinwood Retreat Center and Cane Ridge West Conference and Retreat Center) have your permission to photograph or video record your child for the express purpose of promoting their facilities and ministry of hospitality through print media, digital media, and/or internet platforms. Below you can choose to NOT give your permission.

- I/we authorize the Region to photograph and/or video record (incl. livestreaming) my child/youth.**
- I/we DO NOT authorize the Region to photograph and/or video record (incl. livestreaming) my child/youth.**

Community Covenant

Our summer camp, retreat, education, and mission trip experiences depend on a commitment to living in intentional Christian community by the participants and the adult volunteers. To do so, we agree to a covenant that helps manage our relationships with one another, our behavior within community, and as a community.

We require all participants to read and agree to our Community Covenant below.

Summer camp, retreat, mission trip, or education trips are an opportunity to come to know God while living in intentional Christian community. To ensure every person's worth as a child of God and each person's safety, all participants (youth, children, and adults) follow this Community Covenant:

- I will participate fully in all activities.
- I will be respectful to all persons and the camp environment at all times.
- I understand that the adults are present for my safety, for my questions about life and faith, and that they are responsible to uphold the Region's policies and boundaries as well as that of the camp facilities. I will respect and trust the adults.
- I will not wander away from the camp, small group, cabin group, or the total group without permission from a counselor. The Region practices "Two Deep Leadership" to ensure the safety of all participants.
- I will respect the personal items of other participants (children, youth, and adults) and respect the personal space and other person's physical autonomy.
- I will not bring food to camp unless authorized by the Regional Minister due to my health requirements.
- Accidents happen. I understand that my family could be held financially responsible for any repairs needed to property as a result of my actions.

Community Covenant continued on next page (required)

I understand and accept that if I am found with, or participate in any of the following, that I could be sent home from summer camp, from a retreat, education trip, or mission trip experience at my families expense. I also understand that being sent home may limit or disqualify my participation in summer camp, retreats, education, or mission trips in the future.

- I will not bring weaponry of any sort (knives, firearms, etc.) to camp.
- I will not bring or consume illegal drugs, alcohol, or tobacco of any sort.
- I will not steal anything from anyone.
- I will not physically harm another camper or adult.
- I will not participate in sexual activity of any kind.
- If I behave consistently in a way that disrespects the adults, other campers, or the facility that does not reflect the grace and love that is expected of persons who claim Christian faith.
- I understand that cell phones are allowed as cameras and during cabin time only. Phone calls are for emergency situations and should be arranged by the Site Director.

I look forward to spending time in community with those who share my interest in exploring Christian faith and the practice of Christianity as we play, pray, study, worship, and serve one another following the example of Jesus.

By checking this box the camper and parent(s) provide their digital signature and agree to uphold the Community Covenant.*

You cannot register for camp, retreat, study trip, or mission trip experiences without both agreeing to uphold the Community Covenant.

Cancellation and Refund Policy

Our refund policy is built on the money that has already been spent in the preparation for a camp.

- Cancel 21 days (3 weeks) or more prior to the beginning of your camp to receive a full refund of fees paid minus \$20 administration fee.
- Refunds will not be issued for cancellations made less than three weeks before camp (communicable illness exception below).

Communicable Illness Exception:

If the camper or a family member have been diagnosed with, have experienced symptoms of, or have been exposed to someone who has been diagnosed with any communicable illness (cold, flu, COVID-19, norovirus, etc.) within one week prior to camp starting, you are asked to cancel the camper's registration and a full refund will be issued without question.

Other health reasons such as lice, bed bugs, or other similar issues also fall under this category.

Contact the Regional Office at office@northernlightsdisciples.org or 253-893-7202 ext. 1 to cancel.

If you discover an error or change needing to be made after submitting this registration, please contact the Regional Office (office@northernlightsdisciples.org / 253-893-7202 x1) to get the corrections made. Do not submit a new registration form.

PAYMENT

Subtotal: Total Camp Fee (from page 3): \$ _____

I'd like to help camp ministry funds go further by adding \$8 to cover processing fees:
\$ _____

Total charge to be paid by check received BY the due date:
\$ _____

Remember:

1. Regional and Congregational Scholarships Funds should be approved prior to check payment.

Requests for Regional scholarships must be approved prior to registration.

Regional scholarships up to 50% of camper registration may be granted if there is a need.

To apply for a Regional scholarship, fill out an application at northernlightsdisciples.org/youth-scholarships before registering.

Some congregations offer scholarships as well. Check with your pastor before sending your check.

2. By filing out a hardcopy registration form you are opting to pay by check.

Write a check to the Northern Lights Region for the total amount of the camper's registration fees, using memo "2026 Camp" and mail *with fully completed registration form* to:

Northern Lights Region
4227 S Meridian, C615
Puyallup, WA 98373