



2021 Camp Okoboji Ice Fishing Retreat Registration

Camp Okoboji
1531 Edgewood Dr
Milford, IA 51351
712-337-3325
camp@campokoboji.org

Family's Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ E-Mail Address: _____

Emergency Contact: _____ Relationship: _____ Phone Number: _____

Family Contact Person: _____ Birthdate: __/__/__ Cost: _____

Family Member #1: _____ Birthdate: __/__/__ Cost: _____

Family Member #2 _____ Birthdate: __/__/__ Cost: _____

Family Member #3 _____ Birthdate: __/__/__ Cost: _____

Family Member #4 _____ Birthdate: __/__/__ Cost: _____

Family Member #5 _____ Birthdate: __/__/__ Cost: _____

Family Member #6 _____ Birthdate: __/__/__ Cost: _____

Family Member #7 _____ Birthdate: __/__/__ Cost: _____

Total Cost: _____

Home Congregation: _____ City/State: _____

Does Camp Okoboji need to bill your church? _____

Lodging Preference: _____

Rates

Ages 10 & Up: \$135
Ages 9 & Under: \$85
Ages 2 & Under: Free

Please flip the page over.

Terms and Conditions

Please read through the following terms and conditions to agree to these conditions, please check that you agree to the terms and conditions, and sign your name at the bottom of the page.

Regarding COVID-19

We are honored to provide opportunities to carry out our vision, "Refreshing Body & Spirit," even in the midst of a global pandemic. We are especially honored to provide discipleship growth through our events and programs. We value providing our guests with high-quality experiences that also ensure their overall health and wellbeing. Because of those values, please review the following steps we are taking to prevent viral spread while encouraging overall health.

- Participants are ***NOT*** to come to Camp Okoboji if they are sick, show any symptoms of COVID-19 (*fever, difficulty breathing or shortness of breath, persistent cough, new loss of smell or taste, sore throat, congestion, or running nose*), have flu-like symptoms, are aware that they've been exposed to someone who has tested positive for COVID-19 in the last 7 days, are in isolation because of COVID-19, or are involved in contact tracing of COVID-19.
- The following adjustments have been made
 - **Lodging:** Ice Fishing Retreat participants will be housed in Bethel Retreat Center. Each family unit will be designated their own room.
 - **Meals:** All meals will be served to Ice Fishing Retreat participants in the Bethel Retreat Center. Instructions for meals will be given at the retreat.
 - **Facial Coverings:** Governor Reynold's updated Proclamation of Disaster Emergency (Section Four) regarding facial coverings states that "*all people two or older must wear a mask or other face covering when inside an indoor space that is open to the public and within six feet of individuals who are not members of their household for 15 minutes or longer. This requirement does not apply to the following...any person participating in a service at a spiritual or religious gathering.*" With this consideration, we highly encourage the use of facial coverings in public spaces (i.e. hallways, restrooms, Bethel Main Hall), for the overall health and wellbeing of our discipleship program participants.
 - **Cleaning & Hygiene:** Hand sanitizer will be made available to guests in all public places. Facilities will be cleaned and sanitized by EPA-approved products between groups' usages.
- Participants are responsible for monitoring their own health or the health of their family members. In the event of developing COVID-19 symptoms or being diagnosed with COVID-19 during your stay, please notify the Camp Okoboji staff so we can take the appropriate steps laid out by the Iowa Department of Health.

I have read and understand the above statements. I confirm that I have communicated this information to all the parties of my family and/or group. I agree that we will abide by them. I additionally acknowledge that I am not to and will not knowingly bring any member of my family or group to Camp Okoboji if they are sick, show any symptoms of COVID-19, have flu-like symptoms, are aware that they've been exposed to someone who has tested positive for COVID-19 in the last 7 days, are in isolation because of COVID-19, or are involved in contact tracing of COVID-19.

Registration

I hereby enroll my family to participate in the planned activities of Camp Okoboji's Program, and agree to pay all (or my portion) of any incurred registration fees.

Photo Release

I give my permission for Camp Okoboji to use mine or my child's photo in all publicity.

Family Contact Person Signature : _____

Date: _____

Office Use Only

Date Rec'd _____

Deposit _____

Check No. _____

Amount Due _____ CT _____