

# Camp Leader

## Health & Safety Details

I prefer to work in: (please mark)

Junior Camp \_\_\_\_\_

Senior Camp \_\_\_\_\_

T-Shirt Size - S - M - L - XL - Other

**Date:** July 28 - 1 August, 2025**Location:** Cloverley Hall, Calverhall, Nr. Whitchurch, Shropshire SY13 4PH**Cost: £270** (Deposit of £70 due, with Applications & must be submitted by (8th May 2025).**Remaining Final Payment due by 5th June 2025. - No refund of money after 5th June 2025.****If paying by BACS -/ BBF-GB Camp Fund /Sort - 20-18-27/ Account - 63055086**

|   |                 |
|---|-----------------|
| Full name:  | Male or Female: |
| Name and address of person to be contacted in an emergency:   |                 |
| Phone numbers...  | Work:           |
| Home:   | Mobile:         |
| Please give details of any treatment you may need at camp, any recent operations, or if you suffer from any disability or condition (including asthma, diabetes, epilepsy or travel sickness):  |                 |
| Details (incl. dosage & frequency) of any tablets or medicines you will be bringing to camp:  |                 |
| Any known allergies:  |                 |
| Date of last tetanus vaccination:   |                 |
| Name and address of your family doctor:   |                 |
| Phone:  |                 |
| Any special dietary needs? (vegetarian or Gluten Free etc):   |                 |
| Any other comments that might be helpful to the camp organisers (eg. any special needs, additional behavioural needs, phobias, etc.):   |                 |
| <i>I consent to any emergency medical treatment which may be necessary (including the administration of anaesthetics). I undertake to notify the camp organisers of any changes to these details between now and the start of camp.</i> |                 |
| Signed:   | Date:           |

**PLEASE NOTE:** All Leaders need to provide a Photographic ID sent to Claire Tranter,  
email - [claire.tranter@yahoo.co.uk](mailto:claire.tranter@yahoo.co.uk)

Pastor/youth leader: Please ensure forms are correctly completed and send them and monies due (cheques payable to BBF - GB Camp Fund) to **Mr. Ron Downey Baptist Manse, Caerherbert Lane Rhayader, Wales LD65EE**

|  |   |
|--|---|
| Full name:   | Circle one - Age: 18-25 26-35 36-45 46-55 56- above         |
| Address:   | Phone numbers...  |
|  | Home:   |
| Post Code:   | Alternative:  |
| E-mail:  | Emergency:  |
| Your church:   | Pastor:   |
| Your occupation:   | DBS/(PGB Scotland) Number:                                  |
|  | Date of Issue:  |
| Details of experience of working with children/young people:   |   |
| Please tick if you have any of the following qualifications/skills/expertise:  |   |
| <input type="checkbox"/> First-aid certificate (including expiry date):  | <input type="checkbox"/> Sports (state which):              |
| <input type="checkbox"/> Crafts (please give details):   | <input type="checkbox"/> Music (state which instrument[s]): |
| <input type="checkbox"/> Basic Food Hygiene Certificate:   | <input type="checkbox"/> Photography/video:                 |
| <input type="checkbox"/> Computing & digital photography:  |   |
| Please detail any other skill/qualifications/expertise which you feel may be useful at camp (use additional paper if needed):  |   |
| <b>References:</b>   |   |
| Please give the details of two mature Christians who would be willing to give you a reference:   |   |
| 1. Name:   | 2. Name:  |
| Address:   | Address:  |
| Post code:   | Post code:  |
| Phone:   | Phone:  |
| Email:   | Email:  |
| <b><i>Pastor's recommendation:</i></b>   |   |
| <i>I recommend that this application be accepted and will be pleased to provide any further details required.</i>  |   |
| Pastor's signature:  | Date:   |
| <b><i>Church Safeguarding Officer recommendation:</i></b>  |   |
| <i>I verify that the applicant is up to date with the appropriate DBS training and recommend that this application be accepted. I will be pleased to provide any further details required.</i> |   |
| Safeguarding   |   |
| Officer signature:   | Date:   |

I Promise to approach camp with a Christ like attitude and acknowledge that my personal growth in Christ is a requirement for leaders. I commit to maintain a high moral standard in both my private and public life. I will willingly serve wherever I am most needed as appointed by the Camp leadership be that Jr. or Sr Camp. I recognise camp and preparing for camp will be work and I am willing to do so. If my attitude or my life is not found to be of one who is seeking to grow in Christ. I agree to prayerfully consider and change or be removed from camp leadership.

Signed \_\_\_\_\_

Date: \_\_\_\_\_

## Paintball FORM

### Camp Rise Youth Camp 2025

28th - 1st August - Cloverley Hall

## Adult Participants Consent Form & Rental Agreement

#### SAFETY RULES

Please learn and abide by the rules as set out below:

1. Ensure you listen to and take note of the safety briefing given.
2. Always follow the instructions of the Marshals and abide by their decisions.
3. Never fire anything from your Paint Marker other than the Paintballs provided.
4. Your goggles must be worn at all times once you leave the safety area.

**GOGGLES ARE NEVER TO BE REMOVED FOR ANY REASON WHATSOEVER ON THE GAME FIELD OR FIRING RANGE**

5. Paint markers are NOT allowed in the safety areas. When not on the Game Field, markers must remain on the marker stand.

**MARKERS MUST NEVER ENTER THE SAFETY AREA FOR ANY REASON**

6. No Physical contact is permitted.
7. Do NOT shoot your marker at anyone involved in the game.
8. Do NOT fire your gun once you leave the game field other than at the designated firing range.
9. Do NOT leave the game fields during play. Stay within the defined boundaries.
10. Do NOT shoot at persons closer than 20ft.
11. Do NOT deliberately aim at the head or face.
12. Do NOT deliberately shoot at any visible wild animals.
13. No pyrotechnical devices are permitted.
14. Please respect the equipment, grounds and others.

PLEASE PRINT CLEARLY IN CAPITALS AS THIS IS AN OFFICIAL DOCUMENT

The declaration must be filled out correctly before player is able to participate.

Mr/Mrs/Miss/Other.....

Name:.....

Address:.....

.....

.....Postcode:.....

Phone daytime:.....Phone Evening:.....

Mobile Phone:.....

Adult Players Date of Birth:.....

I, the above names player confirm that I have read and understand all the rules as stated on this form and therefore give my co to the following:

I the undersigned, understand and agree to play the game of paintball entirely at my own risk and recognise that there are such hazards as fallen trees, rabbit holes, and other natural hazards and that the Paintballs fired can bruise and break the skin.

I the undersigned player, believe myself to be physically fit and able to participate in the game of paintball and recognise that a high level of exertion may be required. I shall at all times abide by the safety rules as set out above as well as any further instructions or rules that may be laid out by the Marshalling staff.

I agree that all equipment hired to me will be returned at the end of the event. Should any of equipment that has been issued to me be damaged or lost then a discretionary charge may be made.

I confirm that I am over 16 years of age.

Signed..... Date.....

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Camp Rise 28th July - 1st August 2025 , Cloverley Hall Christian Conference Centre.

## Adult Participants Consent Form Slip and Slide Activity

SAFETY RULES Please learn and abide by the rules as set out below:

1. Ensure you listen to and take note of the safety briefing given.
2. Always follow the instructions of the leaders and abide by their decisions
3. Never use the slip and slide unless permission is given.
4. You must always use the slip and slide in a safe manner. NEVER USE THE SLIP AND SLIDE UNTIL THE PREVIOUS PERSON HAS COMPLETELY FINISHED AND HAS LEFT THE SLIDE
5. Please respect the equipment, grounds and others.
6. Appropriate clothing must be worn at all times. All jewellery etc must not be worn whilst participating.

PLEASE PRINT CLEARLY IN CAPITALS AS THIS IS AN OFFICIAL DOCUMENT

The declaration must be filled out correctly before user is able to participate.

Mr/Mrs/Miss/Other.....  
 Parent / Guardian of.....  
 Address.....  
 .....  
 ..... Post Code:.....  
 Phone daytime:.....  
 Phone Evening:.....  
 Mobile Phone:.....  
 User's Date of Birth:.....

I, the undersigned user, believe myself to be physically fit and able to participate in the activity of slip and slide and recognise that a high level of exertion may be required. I shall at all times abide by the safety rules as set out above as well as any further instructions or rules that may be laid out by leaders.

Signed: (under 18 player).....  
 Date: .....

I confirm that the above mentioned user understands and agrees to participate in the activity of slip and slide entirely at their own risk and recognise that there are hazards and risk of slipping involved. Camp RISE, churches or leaders will not be held responsible for any injury.

Signed (Parent/Guardian) .....Date.....

# To Bring and Not To Bring

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## To Bring:

- Bible & Pen
- **Bedding!! Sleeping Bag, or Sheet Duvet and pillow.**
- Toiletries, Towel & Soap
- Super Soakers, Water pistols, etc. For Water War (Jr. Camp Only)
- Camera & phone – at your own risk.
- Spending Money – For tuck shop
- Appropriate clothing for camp week
  - Sports Clothing for Outside games
  - Old Clothing for Messy games
- Swim wear – Swimming session

PLEASE NOTE: All clothing MUST be of MODEST apparel. DO NOT bring immodest clothing, i.e. crop tops {with stomach showing}, stropny tops, muscle shirts, and short shorts. NO low cut tops. Pastor or Pastors wife will discreetly ask you to change! If in doubt, consult your Pastor/ or Pastor's wife.

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## DO NOT BRING:

- Tobacco (cigarettes, electronic cigarettes, vapes), Alcohol, or any recreational drugs, (These are strictly forbidden!)