



# Big Sky Scholarship Camp

July 25 - August 1, 2026, CAMPER APPLICATION

OFFICE USE ONLY Revision 4/19/2026			
\$Amount			
Check#			
Date			
Balance			

**Eligibility Requirements:** Camper *must (1) be* entering Grades 6-12 in the fall or be a just graduated high school senior, *(2) be* going into 6<sup>th</sup> grade or at least 11 years old by the first day of camp, *(3) for* the first-time camper, *have completed* one year's Awana handbook requirements OR for returning campers, have completed one additional year's Awana handbook requirements (T&T or higher). **All work must be completed before the camper applications are submitted by July 1.**  
**Applications with a Postmark later than July 1, acceptance will be based on available space and funds.**

BSSM Award Scholarship (based on the latest Awana Major Award received, given once): <input type="checkbox"/> Timothy \$80; <input type="checkbox"/> Meritorious \$120; <input type="checkbox"/> Citation \$230.	
<input type="checkbox"/> BSSM Need Scholarship Application (see website for Need Scholarship Application) attached.	
Camper Name	Preferred name for button
Parent/Guardian Name(s)	
Parent Email (s):	
Parent Mailing Address:	
Person(s) Name(s) & email, authorized to check-in camper if different from parent/guardian(s)	
Sponsor(s) Name/Amount(s):	
<b>Total Camp cost</b> is \$280.00	(\$50 Non-refundable but transferable Registration Fee + \$230 Camp Fee).
<b>Funds with Application Due 7/1</b>	Amount
<b>Funds coming from Church/Club</b>	Church/Club Amount
<b>Funds coming from Sponsors</b>	Sponsors Amount per Sponsor
Person(s) Name(s) & email, <b>authorized to check-in camper</b> if different from parent/guardian(s)	
<b>Funds with Camper/Parent/Staff at Camp</b>	Amount

**CERTIFICATE OF ELIGIBILITY: To be filled out AND signed by Awana Commander or Director**

Awana Club: \_\_\_\_\_  
 Club City: \_\_\_\_\_ State: \_\_\_\_\_ Awana Registration Number: \_\_\_\_\_

**Fill in** the appropriate end of Club Year (e.g. YR'25) of **Each** Major Awards earned and **Each** handbooks/manuals\* completed in T&T, Trek, & Journey by this camper.

T&T Book1 YR	Trek Book1 YR	Journey YR	2 Books* Complete =	Excellence	YR
T&T Book2 YR	Trek Book2 YR	Journey YR	4 Books* Complete =	Timothy	YR
T&T Book3 YR	Trek Book3 YR	Journey YR	6 Books* Complete =	Meritorious	YR
T&T Book4 YR		Journey YR	10 Books* Complete =	Citation	YR

I confirm that: (1)  this applicant has already met camper **eligibility requirements** (\*each Book= one year's Awana handbook requirements), (2)  if your club does not have T&T, Trek, or Journey leaders, who was their mentor leader who understood their book and signed off their sections (3)  the applicant's parents/guardians have provided all necessary **signatures** and **medical information**, (4)  the application is **complete**, and (5)  I **recommend** the applicant for Scholarship Camp.

\_\_\_\_\_  
 Commander or Director (circle ONE) (required for acceptance) Signature / Name Printed ( )  
 Phone (circle ONE: home; cell; work)

Email: \_\_\_\_\_ Your Club has  T&T  Trek  Journey  C-Track

\_\_\_\_\_  
 Clubber Mentor Leader Name Printed and email address ( )  
 Phone (circle ONE: home; cell; work)

Mail Camper Application with \$50 Registration Fee (check payable to **BSSM**) by July 1<sup>st</sup> to Camp Registrar:  
 Russ Anderson 5848 Blake Drive Taylorsville, UT 84129

# Big Sky Scholarship Camp Parental Consent and Release of Liability.

Please print and fill in ALL the information and return *PAGES 1, 2, 3 & 4.*

There are 2 age groups at Camp. Those going into 6th through 8th Grade are called JV (Junior Varsity) and those going into 9th through 12th (and Super Seniors, those who just graduated) are called Varsity.

CIRCLE ONE FOR EACH

Male/Female. Grade next fall: (JV 6 7 8)(V 9 10 11 12 Graduate). Adult size T-Shirt: S M L XL XXL

Years at previous Scholarship Camps: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Height (inches): \_\_\_\_\_ KJV NKJV NIV ESV

**Roommate Request** (the 2 must be on each app & in same age group JV or V & both apps in by June 1st):

IMPORTANT: THIS DOCUMENT CONTAINS A RELEASE OF LIABILITY. YOU ARE ADVISED TO REVIEW IT CAREFULLY.

Camp Location:	Old Faithful Christian Ranch, Island Park, ID	Camp Dates:	July 25 - August 1, 2026
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I understand and agree that participation in the Big Sky Strategic Ministries (“BSSM”) Big Sky Scholarship Camp (“Camp”) is a privilege to which my minor child (“Camper”) is not otherwise entitled. In consideration for that privilege, I am signing this Parental Consent and Release of Liability (“Consent”). *I understand and have reviewed the camp dress code, given below, with my camper(s) and have helped them pack accordingly.*

## Big Sky Scholarship Camp – Camp Dress Code

At Big Sky Scholarship Camp, we want everything we do to glorify the Lord, and that includes the way we dress (I Corinthians 10:31). Modesty and appropriateness in a distraction-free environment is the goal for everyone’s week at camp!

Please take the time to review our Dress Code so that you will choose clothes that will be right for camp. Here’s the deal: Campers who choose to wear outfits that are too tight, too loose, or too short will be asked to change. The following policies need to be followed by campers, counselors, and staff alike. Though your clothing choices may be comfortable for you, they may make others uncomfortable; therefore, please take the time to read this!

- Shirts and shoes or sandals must always be worn outdoors or in a public setting. Athletic (closed toe) shoes must be worn for all activities.
- Flannel pants/pajama pants are only acceptable for bedtime/cabin wearing
- No tank tops with straps less than 2 inches, halter tops, low necklines, or narrow/string-type straps
- Shorts, skirts, and dresses must be modest. We use the “fingertip” rule (when standing straight up with hands straight down, shorts/skirts/dresses must be longer than their fingertips, but no shorter than 3-4 inches above the knee.) WE understand that all body types are different, and if the “fingertip” rule does not appear to keep you modest you will be asked to change. Note from a tall girl camper: “I brought my shorts in the men’s department as they are longer and work well for me.” Check it out!
- All clothing must be loose fitting (no yoga/spandex/tight clothing)
- No skin may show between pants and shirt (raise your arms to make sure). Low rise/sagging pants or shorts are not allowed. Ripped pants have the same “fingertip” rule (no upper thigh holes).
- Do not wear clothing that reveals your underwear.
- Offensive clothing, body piercing Jewelry (other than earrings), or tattoos with inappropriate language, or something not honoring to God, is not allowed.

If there is a question about an article of clothing, your counselor or a staff member will speak to you about it privately asking you to change. In all cases, the word of the Camp Director will be final.

Thank you for following the Dress Code. It makes it a lot easier and way more fun for everyone!

\*\* I will follow all rules (including dress code) and enter into the purpose of Camp. \*\*

Camper Signature (required for acceptance)	Date
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## BSSC Parental Consent

**Consent to Attend Camp:** I hereby give permission for the Camper listed here, to attend and participate in the Camp and to be transported to/from Camp, and off campus related activities as needed.



# Big Sky Scholarship Camp Application

**Medical Information** Name of Camper: \_\_\_\_\_

Insurance Co./Policy #:		<input type="checkbox"/> No Health Insurance/Card
<input type="checkbox"/> Insurance Card Copy attached	<input type="checkbox"/> Yes, I have a Health Insurance card and will provide a copy (front & back) to the nurse at check-in. If card is for an insured parent, one copy per family with each child's name written next to the card is acceptable.	
Insured's Name:	Relationship to Camper:	

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of last tetanus: \_\_\_\_\_ Date of last physical: \_\_\_\_\_

List **activity/physical** limitations (please write "None" if applicable): \_\_\_\_\_

List **food** limitations (please write "None" if applicable): \_\_\_\_\_

We provide special meals for camper/staff with food allergies (e.g. gluten free, dairy free, etc.), so please list all food limitations.

List **medical** limitations (please write "None" if applicable): \_\_\_\_\_

Will Camper be under any medication\* while at camp?  Yes;  No. If yes, please provide details: \_\_\_\_\_

**\*All medications are to be in original containers with prescription attached and given to the camp nurse.**

Will Camper be taking any vitamins/health supplements\* while at camp?  Yes;  No. If yes, please provide details: \_\_\_\_\_

**\*All vitamins/health supplements are to be clearly labeled with amounts to be taken and given to the camp nurse.**

The camp nurse has permission to provide Camper with non-prescription medicines as deemed necessary.  Yes;  No. Please list any over-the-counter medicines that should **not** be given to **Camper**. (please write "None" if applicable): \_\_\_\_\_

What else do we need/would you like us (director, cabin leader, nurse) to know about your camper (spiritually, mentally, emotionally, socially etc) that would help us better minister to your camper? You can provide this information separately. (please write "None" if applicable): \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Consent to Medical Treatment:**

If Camper experiences an injury or illness or has other medical needs. I authorize the Camp's employees, volunteers, and agents to make such arrangements for Camper's health and safety, including but not limited to first aid, emergency medical care, ambulance or other transportation to a hospital, medical office, or clinic, testing and examination, and hospital care, and other medical care and treatment (including dental care) as they feel are appropriate in the circumstances. I further agree that I am fully responsible to pay all charges and expenses relating to such care, transportation, and treatment and I hereby fully release BSSM and its directors, officers, employees, volunteers and agents from any claims, including claims for medical charges, prescription costs and other expenses, I might have as a result of such care, transportation and treatment. My signature below also serves to indicate my willingness for my Health Insurance Company (please provide details in the Medical Information section) to be billed for any and all medical fees and services should they be needed. I agree that I will pay all charges and expenses not covered by insurance.

Parent or Guardian Signature: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

**LOST & FOUND:** BSSC/OFCR is not responsible for lost items. Lost, unlabeled items will be held for 30 days. Anything unclaimed will then be donated to charity. If you forgot/lost something at Camp please call Dave Ruthardt @ (307) 883-2654. Cost to return the items will be your responsibility. We have a Camp Bank to minimize lost cash.

It is recommended that each item brought to camp be marked with the Camper's Name. If an item cannot be marked, it should be in a marked piece of luggage. Multiple "dirty clothes" plastic sacks are better than one big one. The smaller ones can fit in the luggage the clean clothes came in.

If you have any questions regarding this application, please email us at [bssm.camp@gmail.com](mailto:bssm.camp@gmail.com) or contact us via our website at [bigskystratmin.org](http://bigskystratmin.org)

**This application must be completed and signed by Awana Commander/Director (page1), Camper (page2), & Parent (pages2&3).**