

# Quest Ministries 2021 Application

Return Application to:

Quest Ministries  
3213 Manchester Ave.  
Monroe, NC 28110

Please Circle appropriate Camp Or Mission and fill in amt. enclosed: Checks/Money Orders payable to Camp Quest Inc.

**CAMPQUEST "No turning Back!"** .....Ages 11-18—June 21-25-- Enclosed \$ \_\_\_\_\_  
**SEA QUEST: OBX MISSION** --Ages 13 up—July, TBA-----Enclosed \$ \_\_\_\_\_  
**INT'L QUEST: Mexico Mission**—October 19-28-----Ages 14 and up-- Enclosed \$ \_\_\_\_\_

**Fees: CampQuest Fees are \$165 for each camper.** Family Discounts – \$150 for each additional camper. Group Rates Available. After June 1 camper fees are \$175 per camper. **SEA QUEST: Outer Banks [OBX] Mission Fees are \$500 and a \$75 deposit** due with application by June 25, Bal. due July 5. Payment plans & Fund Raising Packet available. Call Gerald @ 704.254.4377. **INT'L QUEST: MEXICO MISSION: \$2955** [Contingent upon Airfare & # on Team] w/\$500 Deposit w/App & Mission Profile due July 1. Mission Fees subject to change based on Van Rental and Housing Costs, Flight Costs and Number of Team Members. Total Mission Fees Due **PRIOR** to departure. **ALL FEES ARE NON-REFUNDABLE, NON-TRANSFERABLE**

**Camp Scholarships** Consult with your youth pastor/church pastor first, before asking for our assistance with a scholarship. We verify/consult with your pastor/youth pastor before approving any scholarship request. Scholarships are provided by ministry partners and are available in limited amount for persons desiring to attend camp who may need financial assistance. Mission Trip **Solicitation Practices/Procedures w/Fund Raising Packet** available free. Call 704.254.4377 for information. We strongly urge your family plan for Camp / Mission trip finances well in advance.

**Camp Application deadlines** are June 10. With limited spaces at camp, applications will be evaluated in the order of date received. An Application filed does not guarantee acceptance. Mission Trip Applications' deadlines noted above.

**Camp Affiliation:** Quest Ministries is an independent, nondenominational Christian youth ministry with no official denominational ties. The Board of Directors, Planning Teams and Staff are members of various Christian Churches, and the campers, mission team members and conference attendants, come from various backgrounds and denominations. Zona Maya Discipleship Ministries hosts our Mexico Mission. Camp Quest utilizes the Pleasant Grove Campground, but it is neither a program of Pleasant Grove Campground, Zona Maya Discipleship Ministries, nor of the United Methodist Church. Our ministry is under the umbrella of Life Church formerly Monroe Christian Worship Center. Many churches, businesses and individuals partner with us for Camp Quest and our Mission Opportunities. See our 2020 Brochure or [www.questministriesnc.org](http://www.questministriesnc.org) for more details or email [questministries@carolina.rr.com](mailto:questministries@carolina.rr.com).

Please complete pages 1, front & back for Camp or a Mission Trip. All Appropriate signatures completed. Parental signatures not required for 18 year olds up, but may be required for emergency medical treatment. Please Print w/Bk ink.

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Grade for Student (2021-22): \_\_\_\_\_

[Print Name as it appears on Birth Certificate or Passport; all fields must be completed or filled in]

Name: \_\_\_\_\_ Name Preferred \_\_\_\_\_ Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone(s): \_\_\_\_\_ Email \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Emergency No. \_\_\_\_\_

Parent Work Number(s): \_\_\_\_\_ Camper Cell # \_\_\_\_\_

Home Church: \_\_\_\_\_ Minister: \_\_\_\_\_

Youth Pastor/Leader: \_\_\_\_\_

Church Address: \_\_\_\_\_

Church Telephone: \_\_\_\_\_ T-Shirt Size

(circle one) S      M      L      XL      XXL      XXXL

*Please note the shirt you order is what you'll get! Shirts are adult sizes. (Parent(s) please discuss with your son/daughter)*

<b>QM USE ONLY: Date Rec'd</b> _____	<b>Acpt. Mailed (date)</b> _____	<b>Check #</b> _____	<b>Check \$</b> _____
<b>Cash Rc'd. \$</b> _____	<b>TBP\$</b> _____	<b>SA \$</b> _____	<b>Cabin Counselor:</b> _____
<b>OBX \$</b> _____	<b>- Dep.</b> _____	<b>PDIF</b> _____	<b>TBP:</b> _____
<b>Mexico Mission \$</b> _____	<b>Dep.</b> _____	<b>PDIF</b> _____	<b>TBP:</b> _____

# Quest Ministries 2021

Previous Camp/Mission Experience: \_\_\_\_\_ When: \_\_\_\_\_ Where: \_\_\_\_\_

## CAMPER/PARENT STATEMENTS

**CAMPER STATEMENT:** I want to make this year's camp/mission experience the best ever. I will bring my best attitude, all my cooperation, my talents, and my enthusiasm. I will help to create a healthy, safe and enthusiastic atmosphere, and I will take part in *all* camp/mission directed activities. SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

**PARENT STATEMENT:** I assume full responsibility for \_\_\_\_\_'s behavior and understand that neither the Trustees of Pleasant Grove Campground nor Quest Ministries' Directors or Counselors, Zona Maya Discipleship Ministries, nor Life Church and their respective Administrative Board/Directors, staff/elders/ deacons will be held responsible in any way in case of accident or illness while my child/I is/am a participant in QUEST MINISTRIES' CAMP/MISSION Trip. I understand that *all* Quest Ministries rules are to be obeyed.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

## CAMPER/MISSION TEAM MEMBER MEDICAL INFORMATION

We have been blessed in our camp/mission trips with few, even minor accidents, scrapes, bites, etc. As a precautionary measure, complete the following medical information.

Family Physician/Pediatrician \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

PLEASE NOTE: All medications, prescriptions or non-prescription, are to be discussed with the director/Team counselor for all campers, with camper's name clearly labeled, including name of medication and directions for use. We are not certified to dispense medications but may remind campers of their meds if requested. An up-to-date tetanus shot is recommended of all campers whether coming to camp or mission team. Allergies, Special Diets, Medication(s) or Health Issues: \_\_\_\_\_

## MEDICAL AUTHORIZATION

Should my child/I, \_\_\_\_\_, sustain or incur any accident or illness while attending any Quest Ministries' sponsored activity I hereby authorize the director, or his agent, to execute any and all documents, including any necessary releases, which might be required by any medical facility to perform any emergency care on my behalf. In the event that my child/I has/have an illness or accident while at QUEST MINISTRIES' Camp or Mission Trip which requires a visit to the doctor, ER, UrgentCare. or hospital, any existing family/personal insurance policies will represent the primary insurance coverage.

### RELEASE AND HOLD HARMLESS

I/We the undersigned parent(s) or guardian(s) of the applicant, \_\_\_\_\_, or applicant of legal age, in consideration of our child /my attending Quest Ministries Camp/Mission Trip, give our/my permission and approval for our child/me to travel to and from the NC Outer Banks and the Norfolk, VA area, or Mexico to participate in any and all activities and travel of said camp/mission trip with Gerald S. Broome and/or his designee and hereby assume all risks and hazards of such participation; the undersigned hereby waive, release, and discharge any and all claims of the applicant and the undersigned against QUEST MINISTRIES, the Pleasant Grove Campground, the United Methodist Church, Zona Maya Discipleship Ministries, Life Church, their heirs, affiliates, subsidiaries, agents, employees, contractors, and successors, and assigns on account of such participation, and expressly agree to indemnify and hold harmless said releasees from any and all claims of the applicant and the undersigned. [Both parents/guardians must sign as well as the camper/mission team member.]

SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF CAMPER/Mission Team Member \_\_\_\_\_ DATE: \_\_\_\_\_

### Release for Pictures/Audio Visual/Digital Presentations/Marketing Materials

*For participants under 18 years old: As parent/guardian of (print) \_\_\_\_\_ I/we grant permission for pictures, videos, slides, CDs, or DVDs bearing pictures and /or voice of our son/daughter to be taken as well as other electronic means and used in marketing or promotional for Quest Ministries.*

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

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

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

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

Camper/Mission Team Member print name: \_\_\_\_\_

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

**For STAFF/CAMPERS/Mission Team 18 AND OLDER:** I, (print) \_\_\_\_\_ grant permission for pictures, videos, CDs, DVDs bearing my picture and/or voice to be taken and used in marketing or promotional for Quest Ministries.

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