

B.U.D.D.I.E.S.

Building Up Dedicated Disciples Into Experienced Servants

Application Form

*Applications must be postmarked no later than **April 1.***

Name _____ Date of Application _____

Preferred First Name (as you would want it to appear on a BUDDIES picture board) _____

T-shirt size (circle one) sm med lg xl xxl Gender (circle one) Male Female

Home Address _____

City _____ State _____ Zip _____ Phone (____) _____

Email Address _____ Grade Entering in Fall _____

I have attended Luther Point before as a camper ___ Yes ___ No

Home Congregation _____ City _____

Father or Guardian of B.U.D.D.I.E.S. Applicant _____ Email _____

Home Address _____

(if different than above)

City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____

Mother or Guardian of B.U.D.D.I.E.S. Applicant _____ Email _____

Home Address _____

(if different than above)

City _____ State _____ Zip _____

Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____

We will offer four 2-week B.U.D.D.I.E.S. sessions. Please **indicate your 1st and 2nd choice:**

___ June 11-16 & June 18-23 ___ June 25-30 & July 9-14 ___ July 16-21 & July 23-28 ___ July 30-Aug 4 & Aug 6-11

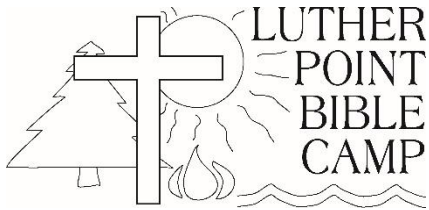
Please return this completed application and the answers to the following questions:

- 1) Briefly describe your faith journey, including any significant people or experiences that have impacted you.
- 2) Why do you want to be part of the B.U.D.D.I.E.S. Program?
- 3) What are three skills you would hope to gain while serving in the B.U.D.D.I.E.S. Program?

I UNDERSTAND AND CERTIFY THAT MY CHILD'S PARTICIPATION IN LUTHER POINT BIBLE CAMP (LPBC) AND ITS ACTIVITIES IS COMPLETELY VOLUNTARY AND I HAVE FAMILIARIZED MYSELF WITH LPBC'S PROGRAM AND ACTIVITIES. I RECOGNIZE THAT CERTAIN HAZARDS AND DANGERS ARE INHERENT IN LPBC EVENTS AND PROGRAMS AND I ACKNOWLEDGE THAT ALTHOUGH LPBC HAS TAKEN SAFETY MEASURES TO MINIMIZE THE RISK OF INJURY, LPBC CANNOT INSURE NOR GUARANTEE THAT THE PARTICIPANTS, EQUIPMENT, PREMISES AND/OR ACTIVITIES WILL BE FREE OF HAZARDS, ACCIDENTS, AND/OR INJURIES. I FURTHER RECOGNIZE AND HAVE INSTRUCTED MY CHILD IN THE IMPORTANCE OF KNOWING AND ABIDING BY LPBC'S RULES, REGULATIONS AND PROCEDURES FOR THE SAFETY OF PARTICIPANTS. I WAIVE ANY CLAIM AGAINST LPBC AND/OR ITS PERSONNEL FOR ANY LOST ARTICLES; FOR ANY INJURY TO MY MINOR CHILD; AND/OR ANY INJURY TO MYSELF. LPBC ASSUMES SECONDARY INSURANCE COVERAGE. I ASSUME PRIMARY COVERAGE. I HEREBY GIVE PERMISSION FOR MY CHILD TO BE GIVEN EMERGENCY MEDICAL CARE; TO BE TRANSPORTED FOR OFF-SITE OUTINGS; AND FOR PHOTOGRAPHS/VIDEO INCLUDING MY CHILD AND/OR MYSELF TO BE USED IN THE PROMOTION OF LPBC AND/OR THE ELCA.

Parent/Guardian Signature: _____ Date: _____

(Required for minor's attendance)



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Important Information

- Applications must be **postmarked** on or before **April 1st**. All applicants will be notified of their status by April 22nd.
- A maximum of six B.U.D.D.I.E.S. will be selected for each session.
- 1st choice of session is not guaranteed, but all effort possible will be made in order to see that it is granted.
- Each year there are many more applicants than spots available. Older applicants will be considered first, as they have fewer opportunities to experience this program in future years.
- Each B.U.D.D.I.E.S. participant will receive a free T-Shirt as part of the program.
- Applicants who are not selected will receive a \$15 discount if they register for a senior high camp before May 8th.

For any questions or concerns, please contact the Program Director at Program@lutherpoint.org or (715) 689-2347