

Dear Camp Director,

Welcome we hope this year 2020 at SBC is a joyous and wonderfully experience for all your campers.

Please note this year we have a new License Agreement for you to sign. This License Agreement must be sign by a corporate board officer of your church or organizations and by the camp director in charge of your camp.

Enclosed in your director's packet are 2 self-addressed envelopes, one is for the new License Agreement and the Director's contract please sign both out and return 2 weeks before your camp starts, the other is for remittance of you camp fee and camp history form. Please mail in no later then 2 weeks after your camp.

1. **New** License Agreement sign and return with camp director's responsibilities form.
2. Please read the Pre-checkout Protocol letter.
3. Please note that SBC does not provide primary medical insurance coverage for staff or campers. Please read carefully the insurance info included.
4. Please read the supply letter concerning supplies you need to bring.
5. You may have up to 280 people in camp over night. We know many people sleep in tents and trailers.
6. The Board **HIGHLY** recommends that each camp do a background check on all staff members that will be working at camp.
7. Equipment break downs will happen without notice. We will make every effort to fix anything as fast as we can. But there is no guarantee that something will not breakdown.
8. The Board is not responsible for the weather, no refunds for weather.

God Bless,
SBC Board of Trustees

Included in this package are the following:

- Camp Director welcome letter.
- **NEW** Pre-checkout Protocol letter
- SBC contract (must be signed and returned 2 weeks before camp)
- Supply letter
- SBC 2020 price schedule
- SBC Invoice
- SBC History form (must be filled out returned with invoice)
- Director's information page
- 4 Accident Injury Forms
- BBQ cleaning instructions
- Canteen cleaning instructions
- Nurse area cleaning instructions
- Cabin cleaning instructions
- Cabin Shower cleaning instructions
- Grounds cleaning instructions
- Swimming Pool cleaning instructions
- Kitchen check off cleaning instructions
- 2 self addressed envelopes (1 for contract, 1 for payment and history form)

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Pre-Checkout Protocol

Hello Everyone,

In the past few years we have had a breakdown in communication on items that were broken/not working during a camp session. In an effort to help get these items fixed in a timely manner and to advise the next incoming camp of a potential problem. We have established a new protocol that will occur on Thursday morning or afternoon.

On Thursday morning after breakfast or lunch the Caretaker (Connie) will ask to meet with the Director and walk the entire camp. (*Before this time the Director should check with staff as to any issues*). Please point out items that you the Director know are broken or not working properly. The Caretaker will note these items and effect repairs or order parts. If your camp broke the item it would be nice if someone could help the caretaker to fix the item.

Our goal is to make sure that camp is safe and secure for all to use. Thank you for your help in this matter.

Areas of concern to check;

- Pool House and pool
- Kitchen, ovens, refrigeration equipment, washing machines...
- Main Lodge area
- Girl's restrooms
- Girls' cabins
- Boy's restrooms
- Boy's cabins
- Canteen
- RV area

SBC Board
March 2016

LICENSE AGREEMENT

This License Agreement, hereinafter "Agreement," is entered into by and between Sierra Bible Camp, hereinafter "Licensor," and Sponsoring Congregation/Organization _____, hereinafter "Licensee."

1. **Description of Property.** Licensor is a holder of a Special Use Permit of certain real property situated in an unincorporated area of Plumas County, California (hereinafter "the Property") and more specifically described as approximately 12 acres within Sec. 27 T.27 N., R. 8 E., MT. DIABLO. The Property includes an organization camp consisting of a dining hall, kitchen, nurse's quarters, staff rooms, swimming pool, 15 cabins, 2 restroom facilities, ball park, basketball court, 2 volleyball courts, canteen, campfire area, chapel area, devotional area, access road, and immediate surrounding area of the Property up to the fire road.

2. **Grant of License.** In consideration of the sum of \$ _____, (fee schedule attached hereto as Addendum A), Licensor grants to Licensee a revocable license (hereinafter "the License"), to use the land and improvements and the operation of concessions and authorized facilities, in compliance with all the conditions of the use permit granted to Licensor and subject to the following reservation of rights and exceptions:

- a. Licensor Sierra Bible Camp Board of Trustees, their agents, representatives, and employees, to enter and remain on the entirety of the Property at all times for the duration of this License;
- b. Licensor has granted an on-site caretaker, for his/her immediate family members and any of his/her visitors, the exclusive right to reside in the caretaker cabin, and full use of the Property. The duties of the caretaker include, but are not limited to, the proper care and maintenance of the land, facilities, and operations of the Property, and to ensure that the use of the Property by Licensee and its staff and campers are within the terms of this License at all times.

3. **Intended Use.** The parties agree that the License and Property is intended for use as a camp for those whom Licensee shall allow onto the Property. The total camp

population during the term of this Agreement shall be limited to 280 people, including both campers and staff. Each cabin will be limited to 12 people.

4. **Assumption of Risks.** Outdoor physical activity, by its very nature, carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. Licensee appreciates the types of injuries that may occur as a result of activities made possible under this Agreement and hereby knowingly assumes all such risks.

5. **Term of License.** The assigned camp week shall be from _____, to _____. The term of this License shall be from 1:00 p.m. on the first identified day and continue until 11:00 a.m. the last identified day. Early or later access onto the Property may be granted, in advance, upon the permission of a member of the Board of Trustees or caretaker. This License shall remain in full force and effect during the entire period of time Licensee has paid for its use.

6. **Required Licenses, Certificates, and Permits.** Any licenses, certificates, or permits required by the federal, state, county, or municipal governments to provide the functions described herein must be procured by Licensee or its agents, employees, or volunteers, and be valid during the term of this Agreement. Further, during the term of this Agreement, Licensee must maintain such licenses, certificates, and permits in full force and effect. Licenses, certificates, and permits may include but are not limited to driver's licenses, professional licenses or certificates, lifeguard certificates, and corporate/business licenses. Such licenses, certificates, and permits will be procured and maintained in force by Licensee at no expense to the Licensor.

7. **Liability Insurance.** Licensee shall procure and maintain in force throughout the duration of this Agreement liability insurance coverage to cover all individuals whom Licensee shall allow to enter onto the Property. Licensee shall add Sierra Bible Camp as an additional covered entity on their liability insurance, which shall be in effect and maintained throughout the term of this Agreement. A copy of the policy evidencing Sierra Bible Camp and as an additional insured must be provided to Licensor prior to the first day of the term of this Agreement. Licensee understands and agrees that Licensor does not provide liability or primary medical coverage for any individual allowed use of the Property, however SBC does provide secondary medical insurance, if primary insurance has not been procured or is not available.

8. **Vehicle Insurance.** If Licensee and its agents, employees, or volunteers utilize a motor vehicle to enter and exit the Property, Licensee shall ensure that each agent, employee, or volunteer shall procure and maintain in force throughout the duration of this Agreement an auto liability insurance policy that meets or exceeds the State Minimum Insurance Requirements. The coverage shall include all Licensee owned vehicles and all hired and non-owned vehicles acting under this Agreement.

9. **Cabin Sleeping Quarters.** Licensee fully understands that the cabins are rustic in nature, and neither temperature controls, CO2 detectors, or guardrails are installed in any sleeping quarters. Licensor is not liable for any claims or actions that may arise from use of these cabin sleeping quarters.

10. **Lifeguard.** Licensee shall have an appropriately certified lifeguard for each swimming activity and shall have written documentation that every lifeguard has demonstrated skill in rescue and emergency procedures specific to the aquatic area and activities guarded.

11. **Health Care Providers.** Licensee must have a licensed physician, registered nurse, licensed vocational nurse, or paramedic on site daily. A staff member with training in the appropriate level of first aid and CPR must be on duty at all times in camp.

12. **Activity and Permission.** Licensee must inform campers and their parents or legal guardians of anticipated activities and gather written permission to participate.

13. **Permission to Treat.** Parents or legal guardians of minors must sign a permission form for camp to provide routine health care, administer prescribed medications, and seek emergency medical treatment if needed.

14. **Contact information.** Information must be gathered on campers that includes name, birth date/age, name/address/phone of adult responsible for each minor, phone of emergency contact, and name/phone of individual's physician.

15. **Emergency Plan and Rehearsal.** Emergency plans must be established and rehearsed to respond to reasonably foreseeable emergencies in camp (such as fire or weather).

16. **Director Qualifications.** Each camp shall have at least one on-site Director. The on-site Director should have at least two seasons of full week camp supervisory experience and be at least 25 years old, unless an exception is granted by the Board of Trustees in writing in

advance of the beginning of the term of this Agreement. The on-site Director(s) shall be identified by Licensee to Licensor prior to the start date of the term of the Agreement.

17. **Director's Responsibilities.** Attached to this Agreement as Addendum B is the Sierra Bible Camp Director's Responsibilities. The Director's Responsibilities are supplemental conditions of this Agreement and are incorporated herein by reference.

18. **Security Concerns.** Licensee has the obligation to ensure the safety of any minors on the Property. Licensee may require unauthorized persons to vacate the Property if the Licensee, in its sole discretion, determines the unauthorized person poses a safety/security risk to the users of the Property. The Director must review security concerns and train staff/campers about steps to take to address possible concerns. Licensee shall be responsible for obtaining an appropriate background check for all individuals who have supervisory authority over minor children and shall exclude from use of the Property those individuals whom they deem to be an unreasonable risk.

19. **Damage and Repair.** Licensee shall ensure that the Property shall be maintained in good condition and repair and left in as good a condition as it was at the beginning of camp, absent normal wear and tear. Camp pranks which damage or destroy the Property is not tolerated. Damage or destruction of the Property may impact later camps and must be repaired immediately. **Liability for costs of repair or replacement of any facility or equipment due to willful or intentional destruction or misconduct by any staff or camper shall be borne by Licensee. Licensee shall report any damage or destruction immediately to the caretaker.**

Initials _____

20. **Release and Indemnification.** The parties agree that Licensor is not liable for any claims or action that may arise from departure from the Property and travel to the surrounding areas, including Lake Almanor, and use of any hiking areas near or surrounding the Property. Licensee hereby releases and agrees to defend, indemnify, and hold harmless the U.S. Department of Agriculture Forest Service, Sierra Bible Camp, its Trustees, agents, assigns, insurers, successors, employees, volunteers, independent contractors, from any and all claims, actions, demands, personal injury, death, property damage, property loss (including theft), court

costs and attorneys' fees arising from the Licensee entering onto and using the Property, including, but not limited to, parking in or using any parking area, whether or not the claim arises from active or passive negligence of Licensor or its agents.

21. **Disputes.** Licensee agrees that if any issue concerning any provision of this Agreement or the rights and duties of either in regard thereto, or the Property, is in dispute, Licensee shall submit written notice of the issue in dispute in writing to the Board of Trustees within 30 days from the time that such disputed issue arises. The parties agree that said dispute shall be discussed and decided before the Board of Trustees of Sierra Bible Camp in Sacramento, California, at a time and date convenient to the parties. The decision shall rest with the Board of Trustees and shall be final, binding, and conclusive, unless determined by an arbitrator to have been fraudulent, capricious, arbitrary, or so grossly erroneous as necessarily to imply bad faith, or not supported by any substantial evidence. Licensee further agrees that if Licensee wishes to appeal the decision of the Board, then the dispute shall be settled by neutral arbitration. Each party shall submit a list of the names and addresses of two or three potential arbitrators from the Sacramento, California area to the other party within ten days after a written demand by Licensee to arbitrate has been given. The parties shall then in good faith mutually agree upon one of the arbitrators from both lists, or choose an arbitrator by any other means of mutual agreement. The Board of Trustees shall then communicate with the agreed upon mediator to schedule the arbitration. The written decision of the appointed arbitrator shall be binding and conclusive on both parties to this Agreement. The costs and expenses of arbitrator shall be divided equally between the parties. The arbitration shall be conducted in accordance with the rules of the American Arbitration Association.

22. **Governing Law.** The parties agree that any dispute to this agreement shall be governed by the federal laws of the United States and the laws of the State of California.

23. **Severability.** If any portion of this Agreement to any person or circumstance shall be declared invalid by a court of competent jurisdiction or if it is found in contravention of any federal, state, or county statute, ordinance, or regulation the remaining provisions of this Agreement or the application thereof shall not be invalidated thereby and shall remain in full force and effect to the extent that the provisions of this Agreement are severable.

24. **Nondiscrimination.** During the performance of this Agreement, Licensee shall not unlawfully discriminate in violation of any Federal, State or local law, rule or regulation against any employee, applicant for employment or person receiving services under this Agreement because of race, religious creed, color, national origin, ancestry, physical or mental disability including perception of disability, medical condition, genetic information, pregnancy related condition, marital status, gender/sex, sexual orientation, gender identity, gender expression, age (over 40), political affiliation or belief, or military and veteran status. Licensee shall comply with all applicable Federal, State and local laws and regulations related to non-discrimination and equal opportunity, including without limitation, California Government Code sections 12900 et seq.; the Federal Civil Rights Act of 1964, as amended; and all applicable regulations promulgated in the California Code of Regulations or the Code of Federal Regulations.

25. **Assignment.** Licensee shall not assign or subcontract this Agreement without the express written consent of Licensor. Further, Licensee shall not assign any monies due or to become due under this Agreement without the prior written consent of Licensor.

26. **Waiver of Default.** Waiver of any default by either party to this Agreement shall not be deemed to be waiver of any subsequent default. Waiver or breach of any provision of this Agreement shall not be deemed to be a waiver of any other provision or subsequent breach, and shall not be construed to be a modification of the terms of this Agreement unless this Agreement is modified.

27. **Modification.** This Agreement may be modified, amended, changed, added to, or subtracted from by the mutual consent of the parties hereto if such amendment or change is in written form and executed with the same formalities as this Agreement and attached to the original Agreement to maintain continuity.

By signing below, I certify that I have read, understand, or have explained to me, and agree to adhere to and abide by this Agreement. The parties have executed this Agreement in duplicate on the date provided below.

SIERRA BIBLE CAMP

**SPONSORING
CONGREGATION/ORGANIZATION**

By _____

By _____

Mike Vincelli,
SBC TRUSTEE

Must be signed by Board Officer

Printed name _____

Title _____

Dated: _____

Dated: _____

**DIRECTOR OF SPONSORING
CONGREGATION/ORGANIZATION**

By _____

Printed Name _____

Dated: _____

To: Camp SBC Directors
 From: SBC Board of Directors
 Date: 5-1-2017
 Subject: Camp supplies

Dear, SBC Director

We the Board hope this letter finds you and your campers in good spirit and looking forward to another camp season at SBC. As you all know this past year and up coming camp seasons have been especially tough on us all due to the economy. SBC is not immune to the rapidly rising cost of propane, trash collection, insurance and many other associated costs with running a summer camp. In order to keep camp costs down the Board has decided to place some of the cost of supplies back on the camps. This decision was not made easily but was made with the best interest of all camps in mind. Below is a list of 8 supply items that each camp will need to bring. These items were selected due to the very uneven usage by each of the camps. It became difficult for the Board to have one camp using 10 packs of paper towels while another used only 2 packs. What ended up happening was the smaller camps were subsidizing the larger camps for consumable supplies.

The caretaker will use the trash bags as needed for the trash cans, and will place Pine Sol and Clorox in the bathrooms as needed from these supplies. Below is a recommendation chart on what to bring to your camp. This is only a recommendation your camp may use more or less.

Revised 5-1-2017

Supplies Items to bring to Camp	Size Camp		
<i>Recommendations Only</i>	80-100 campers	100-150 campers	150-200 campers
Paper towels (Costco 12 pack)	3 packs	4 packs	5 packs
Paper Napkins	6300	7000-9500	9500-12600
Clorox 1 gal bottle	2 gal	3 gal	4 gal
Pine Sol 1 gal bottle	2 gal	2 gal	3 gal
Laundry Soap 3-5 gal bucket	1/2 bucket	1 bucket	1 bucket
Plastic trash bags 45 gal (Costco pack) 1.2 mil+	1 boxes	2 boxes	3 boxes
Plastic trash bags 33 gal (Costco pack) 1.2 mil+	1 boxes	2 boxes	3 boxes
409 cleaner (if needed, not required)	1 gal	1 gal	1 gal
Windex window Cleaner (if needed, not required)	1 gal	1 gal	1 gal

SBC will continue to supply all the other items regularly supplied. Toilet paper, liquid soap, gloves, mop heads, comet, oven cleaner, cleaning pads, SOS, vinegar, Dixie cups, fork, spoon, knives and more.

Thank you all for your help in this matter.
 God Bless you all.

The SBC Board.

ADDENDUM A

SBC 2020 Price Schedule Board Approved Dec. 2019

2 day camp \$2,575 Camp starts Friday night Sat morning ends Sunday night.

3 day camp \$3,400 Camp starts early Friday ends Monday.

Week long Regular Camp session \$8,400 Camp starts on Sat at 1:00 pm and ends on Sat at 11:00 am

If July 4th is during a week of a camp or on a Sat. a discount of 50% will be given to the camp(s) of that week $\$8,400 - 50\% = \$4,200$

If camp is over 200 campers and staff, then the Board is asking for the following donation to help cover the extra cost of electricity, propane, and trash for larger camps.

201-225 campers \$500

226-250 campers \$750

251-280 campers \$900

Sierra Bible Camp Invoice

This is your invoice for camp session _____ year _____. The total cost for the camp use is \$_____.

Please use the provided self addressed envelop to submit your payment no later than two weeks after your camp. Remit address SBC 2042 Trailview Ct. Redding, Ca. 96003

Thank you,

SBC Board.

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Sierra Bible Camp
History for Camp Session ' YEAR _____
Forest Service Information Requirement

Total Campers _____ Boys _____ Girls _____

Total Staff _____ Men _____ Women _____

Baptisms _____ Kitchen staff _____

Transportation: Private vehicle _____
Bus _____ Cost/per _____

Suggested improvements of the facilities:

The SBC board requests you or your representative to attend board meetings.

This is not mandatory but many decisions made affect your session.

Directors or their representative are expected to attend the September Board Meeting. ✓

Dates will be posted on the <http://www.sbcamp.com> site along with any forms.

Directors Information

SPECIAL RULES APPLICABLE TO THE SWIMMING POOL

- Have a qualified lifeguard as a part of your staff to supervise the swimming pool area.
- Plan your pool activities so no mixed (male/female) swimming occurs at the same time.
- Any person (staff or camper) deemed to have a communicable disease or ailment (colds, ear problems, skin rash, etc) should be restricted from the pool.
- Require all persons using the pool shower before entering the pool.
- Restrict boisterous play in the pool area to prevent serious injury.
- Do not allow food or beverages in the pool area.
- To assist the pool filter system to operate properly, any person (male or female) with long hair or hair fasteners to wear a bathing cap.
- Christian modesty in dress and behavior shall be the rule throughout the camp at all times. The elders and camp directors are responsible for this enforcement **not** the SBC Board .

HEALTH of CAMPERS and STAFF /INSURANCE DATA

Each session provides its own special equipment medicines and over-the-counter supplies. It is suggested that each camp session make sure that it is covered with liability insurance.

ESSENTIAL HEALTH INSURANCE INFORMATION

Q. Who is the contact for any health questions for our session?

Mike Vincelli/Treasure 530-243-6620 or Chris Schroder 888-784-1655

Q. How is our session covered by health insurance?

Any camper or staff needing assistance must use their **own** insurance as the primary carrier. We have purchased a supplemental policy which will cover staff and campers. However for each trip to the hospital \$25.00 must be paid at the hospital. It will not cover pre-existing conditions.

Q. What is the extent of this coverage?

The policy is only a supplement to camper's primary coverage; it pays for any sickness only after the **primary** coverage has been used.

Q. Is there coverage if a camper or staff has no coverage?

Yes. It will not pay for any preexistent condition. Coverage is limited by the policy to \$5000.

Q. How do I obtain the necessary forms?

They will be provided by the insuring company included with the Director Package. The caretaker will also have spare set of forms.

Q. Who is responsible for complete and accurate accident sickness reports, including a signature?

The director of the camp session or his designated representative. NOTE: IT IS NOT THE DOCTOR OR HOSPITALS RESPONSIBILITY TO SIGN THE AUTHORIZATION FORM.

Q. Is there any cost to our session for this coverage?

YES! You must pay the hospital or doctor \$25.00 for each visit.

Q. Does the Director need to have information on each camper and staff to assist in the proper health care of people in his session.

YES! All campers and staff should be required to provide shot records, personal insurance carrier, a list of medications being used and any other information the director may require. In addition all camper applications should have an emergency release form for any treatment required.

DO NOT FORGET TO KEEP A DAILY RECORD OF ALL HEALTH/ACCIDENT INCIDENTS.

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Sierra Bible Camp Director's Responsibilities

Session Dates: From _____ To: _____ Year: _____

Please address any questions to:

Mike Vincelli/Treasurer SBC 2042 Trailview Redding, CA 96003 mvincelli@suhsd.net

Please keep one copy for your records and mail the other in the included envelope.

Please check the appropriate items and sign indicating that you have read the director's packet and agree to all items.

_____ I have verified our congregational liability for our insurance coverage, to cover staff and campers. I understand that SBC does **not** provide liability or primary medical coverage. SBC **does** provide secondary medical, if primary not available.

_____ The sponsoring session will add Sierra Bible Camp as an additional covered entity on their liability insurance, **THIS A MUST**. A copy of the policy must be faxed to 530-245-2690 or emailed to mvincelli@suhsd.net before camp, thank you.

_____ I will limit the total camp population to 250 people.

_____ I will provide a qualified nurse to be on campus for the entire session.
(RN, LVN, Paramedic, or Doctor)

_____ I will limit the cabin population to 12 people.

_____ I agree to the terms of the use fee per the 2016 fee schedule enclosed.

_____ I will provide a certified lifeguard to be present when the pool is in used.

_____ I will allow the caretaker to complete his assigned work and assist him in his endeavors. No one from my session will arrive at camp before 1 P.M. on the first day of camp.

_____ I will meet with the caretaker and complete the Pre-checkout protocol.

_____ I will do my best to see that everyone from my session leaves by 11 A.M. on our last day.

_____ I will have all amplifiers/speakers turned off by 10 P.M. per our USFS Canyon Dam Community agreement.

_____ I will agree to and abide by the requests of this document.

Sponsoring Congregation:

Name : _____ Address: _____

Phone: _____

Director : _____

Signature: _____ **Date:** _____

Note: this form MUST be signed and returned two (2) weeks before your week of camp. Rev. 4-2018

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CRUM & FORSTER

Please complete this claim form in full and return to:

NAHGA CLAIM SERVICES
100 MAIN STREET - P.O.B. 189
BRIDGTON, ME 04009
800-952-4320

A. INSURED INFORMATION

Name of Group SIERRA BLUE Camp Certificate or Policy No: US728168
 Name of Participant _____ ID # _____
 Home Address _____
 Number and Street _____ City _____ State _____ Zip Code _____

B. CLAIMANT INFORMATION

Name _____ Relationship to Participant _____
 Address _____
 Number and Street _____ City _____ State _____ Zip Code _____ Phone Number _____
 Date of Birth _____ S.S.# _____ Is Claimant a Full-time Student? Yes No
 Name and Address of School _____
 Does Claimant have any other insurance? Yes No Please provide Name, Address and Policy Number of other insurance: _____

C. CLAIM INFORMATION - THIS SECTION MUST BE FULLY COMPLETED

Date of Injury _____ When was physician first consulted? _____ Nature of Injury _____
 Describe how and where accident occurred _____
 Have you suffered same or similar condition before? Yes No If yes, and you were previously treated, dates treated: _____
 Name and address of physician(s) who treated you: _____
 If hospitalized at that time, date(s) confined to hospital: _____
 Name and address of hospital: _____

IMPORTANT: THIS FORM, ALONG WITH ITEMIZED BILLS IN THE FORM OF "CMS-1500" OR "UB-04", MUST BE COMPLETED AND RETURNED TO THE COMPANY WITHIN 12 MONTHS FROM THE DATE OF TREATMENT. AN INCIDENT REPORT FROM THE GROUP MAY BE REQUESTED.

NEW YORK FRAUD WARNING: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

AUTHORIZATION: I hereby authorize Crum & Forster, United States Fire Insurance Company or its representative, to inspect or secure copies of case history records, laboratory reports, diagnosis, prognosis, x-rays, and any other data necessary to determine eligibility of benefits. I also authorize Crum & Forster, United States Fire Insurance Company or its representative to release and share claim information including that which may be used in the identification and prevention of potential fraudulent activity to any insurance support organization, fraud information clearinghouses, designated service providers and business associates assisting in the processing of this claim. A photo static copy or facsimile of this authorization shall be deemed as effective and valid as the original. This authorization is valid for twelve (12) months from date of signature. I HAVE REVIEWED AND ACKNOWLEDGE THE ATTACHED FRAUD WARNING.

SIGNATURE OF MEMBER _____

DATE _____



CRUM & FORSTER

Please complete this claim form in full and return to:

NAHGA CLAIM SERVICES
100 MAIN STREET - P.O.B. 189
BRIDGTON, ME 04009
800-952-4320

A. INSURED INFORMATION

Name of Group SIERRA-BIKE Camp Certificate or Policy No: US728168
 Name of Participant _____ ID # _____
 Home Address _____
 Number and Street _____ City _____ State _____ Zip Code _____

B. CLAIMANT INFORMATION

Name _____ Relationship to Participant _____
 Address _____
 Number and Street _____ City _____ State _____ Zip Code _____ Phone Number _____
 Date of Birth _____ S.S.# _____ Is Claimant a Full-time Student? Yes No
 Name and Address of School _____
 Does Claimant have any other insurance? Yes No Please provide Name, Address and Policy Number of other insurance: _____

C. CLAIM INFORMATION - THIS SECTION MUST BE FULLY COMPLETED

Date of injury _____ When was physician first consulted? _____ Nature of injury _____
 Describe how and where accident occurred _____
 Have you suffered same or similar condition before? Yes No If yes, and you were previously treated, dates treated: _____
 Name and address of physician(s) who treated you: _____
 If hospitalized at that time, date(s) confined to hospital: _____
 Name and address of hospital: _____

IMPORTANT: THIS FORM, ALONG WITH ITEMIZED BILLS IN THE FORM OF "CMS-1500" OR "UB-04", MUST BE COMPLETED AND RETURNED TO THE COMPANY WITHIN 12 MONTHS FROM THE DATE OF TREATMENT. AN INCIDENT REPORT FROM THE GROUP MAY BE REQUESTED.

NEW YORK FRAUD WARNING: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

AUTHORIZATION: I hereby authorize Crum & Forster, United States Fire Insurance Company or its representative, to inspect or secure copies of case history records, laboratory reports, diagnosis, prognosis, x-rays, and any other data necessary to determine eligibility of benefits. I also authorize Crum & Forster, United States Fire Insurance Company or its representative to release and share claim information including that which may be used in the identification and prevention of potential fraudulent activity to any insurance support organization, fraud information clearinghouses, designated service providers and business associates assisting in the processing of this claim. A photo static copy or facsimile of this authorization shall be deemed as effective and valid as the original. This authorization is valid for twelve (12) months from date of signature. I HAVE REVIEWED AND ACKNOWLEDGE THE ATTACHED FRAUD WARNING.

SIGNATURE OF MEMBER _____

DATE _____



CRUM & FORSTER

Please complete this claim form in full and return to:

NAHGA CLAIM SERVICES
100 MAIN STREET - P.O.B. 189
BRIDGTON, ME 04009
800-952-4320

A. INSURED INFORMATION

Name of Group SIERRA BLUE Camp Certificate or Policy No: US728168
 Name of Participant _____ ID # _____
 Home Address _____
 Number and Street _____ City _____ State _____ Zip Code _____

B. CLAIMANT INFORMATION

Name _____ Relationship to Participant _____
 Address _____
 Number and Street _____ City _____ State _____ Zip Code _____ Phone Number _____
 Date of Birth _____ S.S.# _____ Is Claimant a Full-time Student? Yes No
 Name and Address of School _____
 Does Claimant have any other insurance? Yes No Please provide Name, Address and Policy Number of other insurance: _____

C. CLAIM INFORMATION - THIS SECTION MUST BE FULLY COMPLETED

Date of Injury _____ When was physician first consulted? _____ Nature of Injury _____
 Describe how and where accident occurred _____
 Have you suffered same or similar condition before? Yes No If yes, and you were previously treated, dates treated: _____
 Name and address of physician(s) who treated you: _____
 If hospitalized at that time, date(s) confined to hospital: _____
 Name and address of hospital: _____

IMPORTANT: THIS FORM, ALONG WITH ITEMIZED BILLS IN THE FORM OF "CMS-1500" OR "UB-04", MUST BE COMPLETED AND RETURNED TO THE COMPANY WITHIN 12 MONTHS FROM THE DATE OF TREATMENT. AN INCIDENT REPORT FROM THE GROUP MAY BE REQUESTED.

NEW YORK FRAUD WARNING: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

AUTHORIZATION: I hereby authorize Crum & Forster, United States Fire Insurance Company or its representative, to inspect or secure copies of case history records, laboratory reports, diagnosis, prognosis, x-rays, and any other data necessary to determine eligibility of benefits. I also authorize Crum & Forster, United States Fire Insurance Company or its representative to release and share claim information including that which may be used in the identification and prevention of potential fraudulent activity to any insurance support organization, fraud information clearinghouses, designated service providers and business associates assisting in the processing of this claim. A photo static copy or facsimile of this authorization shall be deemed as effective and valid as the original. This authorization is valid for twelve (12) months from date of signature. I HAVE REVIEWED AND ACKNOWLEDGE THE ATTACHED FRAUD WARNING.

SIGNATURE OF MEMBER _____

DATE _____



CRUM & FORSTER

Please complete this claim form in full and return to:

NAHGA CLAIM SERVICES
100 MAIN STREET - P.O.B. 189
BRIDGTON, ME 04009
800-952-4320

A. INSURED INFORMATION

Name of Group SIERRA-BIKE Camp Certificate or Policy No: US728168
 Name of Participant _____ ID # _____
 Home Address _____
 Number and Street _____ City _____ State _____ Zip Code _____

B. CLAIMANT INFORMATION

Name _____ Relationship to Participant _____
 Address _____
 Number and Street _____ City _____ State _____ Zip Code _____ Phone Number _____
 Date of Birth _____ S.S.# _____ Is Claimant a Full-time Student? Yes No
 Name and Address of School _____
 Does Claimant have any other insurance? Yes No Please provide Name, Address and Policy Number of other insurance: _____

C. CLAIM INFORMATION - THIS SECTION MUST BE FULLY COMPLETED

Date of Injury _____ When was physician first consulted? _____ Nature of Injury _____
 Describe how and where accident occurred _____
 Have you suffered same or similar condition before? Yes No If yes, and you were previously treated, dates treated: _____
 Name and address of physician(s) who treated you: _____
 If hospitalized at that time, date(s) confined to hospital: _____
 Name and address of hospital: _____

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SIGNATURE OF MEMBER _____

DATE _____

BBQ Cleaning Instructions

Date: 10-06-2007

These instructions are for cleaning the Gas BBQ, note it is a BBQ we expect it only to be clean for a BBQ.

1. Remove grills and wash with soap and water. It is not necessary to have clean shining stainless steel. Just wash a little and dry.

2. Remove water tray/grease trays (2) clean with soap and water and wipe out bottom of BBQ. Dry and replace. It is not necessary to have clean shining stainless steel. Note trays will fit in pots and pans sink.

3. Wipe down outside of BBQ with a little 409.

All Done.

CANTEEN

Final Clean-up

Remove all personal items. Do not leave any commodities unless you have made arrangements with the following camp to do so. Leave freezer and refrigerators plugged in and do not adjust thermostats.

The canteen is a food processing facility and should be cleaned with that in mind. All counter surfaces, sink, shelving, drains, and interior surfaces of the refrigeration surfaces must be thoroughly cleaned and disinfected. The soda coolers shall be cleaned inside using a mild solution of disinfectant. Spills in the freezers must be clean up. The floor shall be thoroughly broom swept, debris removed, and damp mopped with disinfectant. Hose down exterior cement area. Place tables/benches in place and hose off.

Supervisor for this project is _____

Thank you.

FINAL CLEANING OF NURSE AREA, STAFF BERTHING AREA, STAFF RESTROOMS

Staff
restrooms
consist of:

Main building:

West end: Women's and Men's toilets and Shower

East end: Toilet off of kitchen

Pool house: North and south side (w/shower)

Remove any personal items. Scour the face bowls with cleanser and towel dry. Clean the urinal and toilet bowl with a toilet brush and disinfect the toilet seats on both sides. Remove pieces of soap and any other items from the shower stall and wipe down the shower stall with a clean rag removing any foreign matter from the floor drain. Sweep and mop the floor.

Rinse the mop and return cleaning tools and supplies to the storage from which they were obtained.

Main building Men's toilet Main building Women's toilet Shower Nurse's Area
 Pool house North toilet Pool house South bathroom Staff Berthing Area

Supervisor for this project is _____

Thank you.

Sierra Bible Camp

CABIN CLEAN-UP REQUIREMENTS

INTERIOR CLEANING:

Cabin floors must be free of litter and swept. Close all windows. Mattresses shall be stacked on the benches in the center of the cabin. Bunks must be free of debris, waste containers emptied into center court trash containers. One broom to remain in each cabin.

- Personal Items Mattresses Bunks Floors Trash
 Cleaning Gear

EXTERIOR CLEANING:

All debris shall be removed from under the porches, common area, between the cabins and 25 feet radius behind the cabins. Place trash in containers in center court. After cabins have been inspected, hose down center court porches and gravel.

- Under Porch Between Cabins Common Area Rear Area Trash

Supervisor for this project is _____

Thank you.

Sierra Bible Camp

CABIN AREA SHOWERS & TOILETS CLEANING REQUIREMENTS

RESTROOMS:

1. Remove all personal items from inside and outside of the building.
2. Shower stalls shall be free of stains and debris and dry wiped; floor grates shall be stored vertically leaning against the shower stalls, refill toilet paper holders with toilet paper/sanitary holders with bags and hand soap dispensers with liquid soap.
3. Toilets (including both sides of the toilet seats) and urinals cleaned and disinfected.
4. Face bowls scoured with a scrubbing compound, rinsed, and dry wiped.
5. Vanity tops must not be scoured with a scrubbing compound, but dry wiped. Clean drain screen.
6. Floor, including locked/inventory area, shall be swept (and debris removed) and mopped with water/pine sol.
7. Mop thoroughly rinsed with fresh water and cleaning gear neatly stored.
8. Clothes lines shall be vacated.
9. Grounds within a 25-foot radius shall be free of litter.
10. Abandoned personal items shall be bagged and brought to the Main Building common area.

- Personal Items Shower Stalls Floor Grates Urinals
- Face Bowls/drain screens Vanity Tops Floor Mop Rinsed
- Cleaning Gear Neatly Stored Clothe Lines Grounds

Supervisor for this project is _____.

Thank you

SIERRA BIBLE CAMP GROUNDS CLEAN UP

All grounds, including up to 25 feet on the north, east, and west ends of the Main Building, the ball diamond, and the common area south to the edge of the camp property, must be free of litter.

The church bowl pea gravel shall be raked level and all debris removed.

The fire pit at the campfire bowl shall be cleaned and partially burned logs stack in the center of the fire pit, and all debris remove from the campfire bowl. The stage shall be swept clean.

All benches in the outlying area must be returned to the south overhang of the canteen.

Any excavated pits must be refilled with soil and raked level. Any pea gravel removed from a sports court must be replaced and raked level.

Supervisor for this project is: _____

Thank you

SIERRA BIBLE CAMP

Swimming Pool and Pool House

The swimming pool area shall be free of debris, and all equipment properly stored.

Remove all personal items from the pool house to the Main Building common area.
Remove all debris from the floor; sweep and mop the floor using a disinfectant in the final mop water.

Supervisor for this project is _____.

Thank you

Sierra Bible Camp

Kitchen Check Out List

Camp Session _____

Dates _____

Cook _____

	Notes	Signed off	
To be cleaned	Information about items	Cleaned by	Cook check
Clock case			
Front cabinet bottom / DH			
Silverware cabinet & top			
Large mixer			
Middle size mixer			
Toaster cabinet			
Small appliances			
Meat slicer			
Right wall - South wall			
Window sill right wall			
Left wall - North wall			
Front wall - West wall			
Back wall - East wall			
Window sill back wall			
Window sill racks			
Backwall fan			
Hot water heater top			
Large bowl roller stand			
Front counter inside			
Front counter			
Lid shelf			
3 Door freezer - In dining hall			
Small metal stands			
Flour bin			
Sugar bin			
Brown table top			
" top shelves			
" bottom shelves			
Ovens - Tops			
Racks			
Stainless oven walls			
Stove - Cook top			
Stainless grease wall			
Grease trap			
Filters over grill			
Filter trough			
Range frame out-side			
Range frame in-side			
Hood out-side			
Hood in-side			
Walk-in - walls			
Shelves			
Ceiling			
Floor			
	Notes	Signed off	

Sierra Bible Camp

Kitchen Check Out List

Camp Session _____

Dates _____

Cook _____

To be cleaned	Information about items	Cleaned by	Cook check
Reach-in Facing table			
out-side			
Inside walls			
Shelves			
Top			
Shelves at end of reach-ins			
Bread table top & bottom			
Long stainless table			
Short stainless table top & bottom			
Back room wall			
Top shelves			
Middle shelves			
Bottom shelves			
Spice table			
Spice shelf			
Counter top			
Bottom shelf			
Ceiling fans			
Ice maker and top			
Storage shelves - mess hall			
Dishwashing room			
Large table			
Stainless cabinet			
Dishwashing machine			
Shelves			
Floor			
Glass racks			
Cup racks			
Silverware cabinet top			
Veggie sink			
Pots & pans sinks			
Stainless roll cart			
Bread rack			
Microwave Oven			
Bar-b-que grill			
Garbage cans			
Kitchen floor			