

# Sierra Bible Camp Director's Contract

Session Dates: From \_\_\_\_\_ To: \_\_\_\_\_ Year: \_\_\_\_\_

Please address any questions to:

Mike Vincelli/President SBC 2042 Trailview Redding, Ca. 96003 [mvincelli@suhsd.net](mailto: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.

\_\_\_\_\_ The sponsoring session will add Sierra Bible Camp as an additional covered entity on their liability insurance. A copy of the policy must be faxed to 530-245-2690 or emailed to [mvincelli@suhsd.net](mailto:mvincelli@suhsd.net) before camp.

\_\_\_\_\_ I will limit the total camp population to 230 people.

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

\_\_\_\_\_ I will limit the cabin population to 12 people.

\_\_\_\_\_ I agree to the terms of the use fee per the 2011 fee schedule enclosed.

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

\_\_\_\_\_ I recognize the extreme fire dangers that exist during the summer and I will make every effort to reduce any hazard during my session.

\_\_\_\_\_ 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 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 request 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. 5-2011