



www.DeerRunRetreat.org

DEER RUN
RETREAT

DEER RUN CHRISTIAN CAMPS

DEER RUN RETREAT

Mail 3845 Perkins Road | Thompson's Station, TN 37179

E-mail Registration@DeerRunRetreat.org

Office 615-794-2918

2010 CAMPER REGISTRATION

PLEASE PRINT ALL INFORMATION LEGIBLY. Mail a completed form for each camper.

If you have more than one camper in your household, mail all forms together. The \$20 Early Bird discount is available for all campers until March 15, 2010. Beginning March 16, 2010, you can receive the \$20 sibling discount on the second, third, etc. camper for families who register multiple campers living in the same household.

Registration is not complete until the \$75 per camper non-refundable deposit is received by the camp office, payable by either check or credit card (Visa, MasterCard, or Discover). A deposit is required for each separate week of camp and for each camper who is registering.

CAMPER Name Last _____ First _____ MI _____

Name Camper Prefers _____ Birthday (MM/DD/YY) _____

Gender M F School Grade Completed, Spring 2010 _____

Address _____

City, State, Zip _____

PARENT/Guardian 1 Name Last _____ First _____

Address (if different than above) _____

City, State, Zip _____

Home Phone () _____ Work Phone () _____

Mobile/Pager () _____ E-mail _____

PARENT/Guardian 2 Name Last _____ First _____

Address (if different than above) _____

City, State, Zip _____

Home Phone () _____ Work Phone () _____

Mobile/Pager () _____ E-mail _____

Emergency Contact Name & Phone _____

Please let us know how you heard about Deer Run Christian Camps? _____

DEER RUN CHRISTIAN CAMPS 2010 CAMPER REGISTRATION

Please reserve a space for _____ for the following camp(s).
(camper first and last name)

OVERNIGHT CAMP
Sun 3 p.m.-Fri 10:30 a.m.
\$349 PER CAMPER PER WEEK

YOUTH CAMP
Completed Grades 6-12
 July 11-16

PRETEEN CAMP
Completed Grades 3-5
 Preteen Camp 1: July 18-23
 Preteen Camp 2: July 25-30

DAY CAMP
Mon-Thurs, 8 a.m.-4 p.m. & Fri 8 a.m.-12:30 p.m.
\$219 PER CAMPER PER WEEK

Completed Grades K-5
 Day Camp 1: June 7-11
 Day Camp 2: June 14-18
 Day Camp 3: June 28-July 2
 Day Camp 4: July 5-9

See page 4 for Day Camp options:
camper transportation, extended care, family day.

Total number of camp weeks _____ x \$75 deposit per camp week = \$ _____ deposit

A camper is not registered nor their space reserved until the deposit is received by the camp office.

Check

Mail check with registration form to Deer Run Retreat, 3845 Perkins Rd, Thompson's Station, TN 37179

MasterCard, Visa, or Discover

Mail registration form to Deer Run Retreat, 3845 Perkins Rd, Thompson's Station, TN 37179, then call 615-794-2918 to pay the deposit with a check card or credit card.

CAMP T-SHIRT

Campers receive a 2010 camp t-shirt with each registration. Please reserve a shirt for your camper!

Youth S Youth M Youth L Adult S Adult M Adult L Adult XL Adult XXL

INDIVIDUAL CAMPER DISCOUNTS (Not available for church groups.)

Discounts are on the balance, not on the deposit, and will be reflected on the final balance invoice.

Only 1 discount per camper with the exception of an event code which can be combined with another discount.

\$20 Early Bird: Deposit rec'd by 3/15/10.

\$20 Sibling: Available BEGINNING 3/16/10; discount off the registration price on the 2nd, 3rd, etc. camper for families who register multiple campers living in the same household.

\$10 Event Code _____ (Promotional cards at Deer Run Retreat events have this code on them. Please write code in blank.)

CHURCH GROUP DISCOUNT

\$20 Church Group Code _____ Please enter the discount code given to you from your group leader.

This is a \$20 discount per camper. Campers will be in the same overnight facility, but not necessarily together during day activities so campers can make as many new friends as possible.

PREPAID CAMP STORE CAMP BUCKS

Pre-paid Camp Bucks (in increments of \$10) can be added to the final balance invoice. Having Camp Bucks means a camper does not need to keep up with money while at camp. Camp Bucks are kept at the Camp Store in the camper's name and purchases are subtracted from the total each time a purchase is made. The Camp Store has snacks, beverages, t-shirts, bandanas, lanyards, etc. for purchase throughout the camp week.

Note: unused Camp Bucks will not be returned for cash nor credited towards unpaid balances of any kind.

Camp Bucks may also be purchased during the week of camp at the Camp Store.

\$10 \$20 \$30 \$40 \$50 \$60 Other \$ _____

DEER RUN CHRISTIAN CAMPS 2010 CAMPER REGISTRATION

OPTIONAL DAY CAMP SERVICES

EXTENDED CARE FOR DAY CAMP

- Early arrival and late pick up Mon-Fri 7 a.m. Mon-Thurs 5 p.m. **\$45** per week per camper
- Early arrival only Mon-Fri 7 a.m. Drop Off **\$25** per week per camper
- Late pick up only Mon-Thurs 5 p.m. Pick Up (No Fri Service) **\$20** per week per camper

TOTAL COST EXTENDED CARE \$ _____

CAMPER TRANSPORTATION TO/FROM DAY CAMP **\$30** per week per camper

Morning Pick Up at 7:30 a.m. Tues-Fri and Afternoon Drop Off at 4:30 p.m. Mon-Thurs

Please note that seating is limited and is offered on a first-come, first-serve basis. If you would like for your child to be picked up in the morning at one location and dropped off in the afternoon at a different location, you must select and pay for both locations.

IMPORTANT INFO! There is no morning pick up on Monday; please bring your camper to camp the first day arriving no later than 8:00 a.m. Since camp ends on Friday at 12:30 p.m., there will be no Friday afternoon camper transportation to offsite locations. Please make arrangements for your camper to be picked up at camp by 12:30 p.m..

- Location 1:** Brentwood Baptist Church a.m. only p.m. only BOTH a.m. & p.m.
- Location 2:** Thompson Station Church a.m. only p.m. only BOTH a.m. & p.m.
- Location 3:** The Peoples Church a.m. only p.m. only BOTH a.m. & p.m.
- Location 4:** Jim Warren Park a.m. only p.m. only BOTH a.m. & p.m.

TOTAL COST CAMPER TRANSPORTATION \$ _____

FRIDAY FAMILY DAY

Parents, grandparents, siblings, or other relatives may spend the day on Friday with their camper(s) enjoying a few day camp experiences. **For an additional fee, lunch is provided at 11 a.m. for your camper(s) and family. It is recommended that registration and payment be made in advance. Please register below.**

Parents and families who choose not to stay with their camper for the activities and lunch need to pick up campers no later than 12:30 p.m. on Friday. These campers should also bring their lunch and drink on Friday.

Note: If registering more than one camper in a household, fill this out ONLY ONCE for all campers and all family members with the first camper's registration. YOU MUST ALSO PAY FOR EACH CAMPER'S LUNCH.

- Adults \$5 x _____ # of Adults Adult Cost \$ _____
- Child Ages 4-12, including camper(s) \$3 x _____ # Children Child Cost \$ _____
- Child Age 3 & Under Free x _____ # Children 3 & Under FREE

TOTAL COST FRIDAY FAMILY DAY \$ _____

TOTAL COST FOR OPTIONAL DAY CAMP SERVICES \$ _____

This total will be added to your final balance.

DEER RUN CHRISTIAN CAMPS 2010 CAMPER REGISTRATION

CAMPER SCHOLARSHIP FUND

Please consider providing a camping experience for a child who would not be able to attend camp without financial assistance. Please choose a dollar amount for a tax deductible donation. Thank you for your generosity!

\$10 \$25 \$50 \$100 \$200 \$300 Other \$ _____

DAY CAMPER POLICY: FRIEND REQUEST

If requested, Deer Run Christian Camps will do our best to place campers with a friend.

List the first and last name of one fellow camper with which the camper would like to be placed in the same group. Campers are more likely to be placed together if their ages are within one year of each other. Both campers should have each other's names listed as their one friend request in this space when submitting their registration forms.

Note: If the 2 campers are not the same age, the older camper will be placed in the same group as the younger camper. We want all campers to make as many new friends as possible so we encourage only one friend request per camper.

Camper First/Last Name: _____

Camper Friend First/Last Name: _____

OVERNIGHT CAMPER POLICY: FRIEND REQUEST

If requested, Deer Run Christian Camps will do our best to place campers with friends.

List the first and last name of up to 2 fellow campers with which the camper would like to be placed in the same group during the day for recreation, Bible study, crafts, etc. Campers are more likely to be placed together if their ages are within one year of each other. Each camper should have the other's names listed as their two friend request in this space when submitting their registration forms.

Note: If the 3 campers are not the same age, the older two campers will be placed in the same group as the younger camper. We want all campers to make as many new friends as possible so we encourage only two friend requests per camper.

Camper First/Last Name: _____

Camper Friend First/Last Name: _____

Camper Friend First/Last Name: _____

- Please check here, if it is more important for the camper to be with these 2 friends for lodging at night. This means they may be separated during the day small group activities. This request must be for campers of the same gender.



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CAMPER TRANSPORTATION RELEASE FORM

COMPLETE THIS FORM FOR EACH CAMPER USING DEER RUN CHRISTIAN CAMP TRANSPORTATION.

I/We, the undersigned parent(s)/guardian(s) of _____

PRINT Full Name of Camper

do hereby give permission to authorized representatives of Deer Run Retreat Center/Deer Run Christian Camps to provide transportation for the aforementioned camper in an authorized vehicle so the aforementioned camper can participate in Deer Run Christian Camp (camp dates listed below).

By signing this document I/we accept and assume responsibility for any and all such risks, whether or not specifically itemized herein and I/we acknowledge that Deer Run Retreat Center and/or Deer Run Christian Camps, its employees, associates, corporate officers, board members, property owners, family of the same and any organization that Deer Run Retreat Center and/or Deer Run Christian Camps represents or contracts with shall be held harmless and blameless in the event of such an aforementioned mishap. I/We know and am/are prepared for the aforementioned risks and will not look to any entity or individual nor hold them responsible for my/our child's well-being or the protection from such risks, whether or not those risks are known or unknown by those organizations or individuals.

In consideration of participating in any and all activities with Deer Run Retreat Center and/or Deer Run Christian Camps I/we, on my behalf and on behalf of my heirs, assigns, and representatives, do hereby irrevocably release Deer Run Retreat Center and/or Deer Run Christian Camps, its employees, associates, corporate officers, board members, property owners, family of the same and any organization that Deer Run Retreat Center and/or Deer Run Christian Camps represents or contracts with, their successors and assigns from any and all claims which involve any nature of injury or death or damage to persons or property that may occur as a result of my or my child's attendance or participation in such aforementioned activities.

Permission is Granted for Transportation (please enter as many dates as the camper is registered for):

From Camp Start Date _____, 2010 to Camp End Date _____, 2010.

From Camp Start Date _____, 2010 to Camp End Date _____, 2010.

From Camp Start Date _____, 2010 to Camp End Date _____, 2010.

From Camp Start Date _____, 2010 to Camp End Date _____, 2010.

Print Name of Parent/Guardian 1

Print Name of Parent/Guardian 2

Signature of Parent/Guardian 1

Signature of Parent/Guardian 2

Date

Date



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Camps.DeerRunRetreat.org

**Instructions for
INDIVIDUAL CAMPERS:**

MAIL OR hand deliver (**DO NOT
FAX**) the 2-page completed Medical
Release form to Deer Run Retreat
NO LATER THAN 14 DAYS BEFORE
your camp start date.

**Instructions for
GROUP CAMPERS:**

Group Leader: Provide a copy
to each participant in your group.

Parents: Return completed forms
to the Group Leader unless told
differently by the group leader.

Group Leader: MAIL OR hand
deliver (**DO NOT FAX**) the 2-page
completed Medical Release forms to
Deer Run Retreat **NO LATER THAN
14 DAYS BEFORE** your camp start
date.

Please put all completed forms
in **alphabetical order** when mailing
to Deer Run.

MEDICAL RELEASE FORM

Please **PRINT** clearly. All information provided on this form is kept confidential.

Camper Name _____

Address _____

City/State/Zip _____

Email Address _____

Birth Date _____ Age _____ Phone Home Cell _____

Primary Physician _____ Phone _____

Address _____

City/State/Zip _____

In An Emergency Notify _____

Relationship to Camper _____ Phone _____

List any physical problems, limitations, major operations, or serious injuries within the last 2 years. Include an explanation if needed. (ex: bone or joint injuries, diabetes or hypoglycemia, back problems, high blood pressure, respiratory problems)

SPECIAL NEEDS

Please describe special needs so our staff will be prepared. If necessary, please call our office to describe special care or assistance needed.

Fill in the following information or provide a legible copy of your insurance card.

Medical Insurance Company _____

Subscriber Name _____

Subscriber I.D.# _____ Group # _____

I give Deer Run Retreat Center and/or Deer Run Christian Camps permission to engage medical help for my dependent child should an emergency medical situation arise while attending or participating in any retreat, event, or camp with said organization. I certify that the above information is accurate and complete to the best of my knowledge.

Signature _____ Date _____
(parent or legal guardian if a minor)

PARENT OR LEGAL GUARDIAN OF MINORS: I give Deer Run Retreat and/or Deer Run Christian Camps permission to administer first aid to my child including over-the-counter drugs for minor headaches or aches, wounds, stings, stomach virus, etc. in case of an illness or accident. [Note: Any allergies to medications should be listed on page 2.]

Signature _____ Date _____

NOTARY REQUIRED IF THE ATTENDEE IS YOUNGER THAN 18 YEARS OF AGE.

_____ sworn to and subscribed before me
on this the _____ day of _____, 20____.

Notary Public Signature

My Commission Expires



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Updated 2/10

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MEDICAL INFORMATION (page 2)

Please PRINT clearly. All information provided on this form is kept confidential.

Camper Name _____

LIST ANY DRUG, FOOD, OR INSECT ALLERGIES _____

LIST OVER-THE-COUNTER MEDICATION(S) THAT **SHOULD NOT** BE ADMINISTERED
TO CAMPER NAMED ABOVE (i.e. Tylenol, Ibuprofen, Benadryl, Pepto Bismol)

DATE OF LAST TETANUS SHOT _____

CURRENT MEDICATIONS

List prescriptions or over-the-counter drugs that the camper named above will be taking during their time at camp.

PARENTS: Any medications administered by the camp nurse, both prescription drugs or over-the-counter drugs, must be in the original container and must be checked in by the nurse upon camper arrival.

Please fill in all information for each medication. Please copy this page if more than 5 medications need to be listed.

1) Name of Medication _____

Dosage Time (how often or what time the medication is to be administered) _____

Dosage Amount _____

Prescribing Doctor's Name & Phone Number _____

2) Name of Medication _____

Dosage Time (how often or what time the medication is to be administered) _____

Dosage Amount _____

Prescribing Doctor's Name & Phone Number _____

3) Name of Medication _____

Dosage Time (how often or what time the medication is to be administered) _____

Dosage Amount _____

Prescribing Doctor's Name & Phone Number _____

4) Name of Medication _____

Dosage Time (how often or what time the medication is to be administered) _____

Dosage Amount _____

Prescribing Doctor's Name & Phone Number _____

5) Name of Medication _____

Dosage Time (how often or what time the medication is to be administered) _____

Dosage Amount _____

Prescribing Doctor's Name & Phone Number _____



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your camp start date.

**Instructions for
GROUP CAMPERS:**

Group Leader: Provide a copy
to each participant in your group.

Parents: Return completed forms
to the Group Leader unless told
differently by the group leader.

Group Leader: MAIL OR hand
deliver (**DO NOT FAX**) the 2-page
completed Medical Release forms to
Deer Run Retreat **NO LATER THAN
14 DAYS BEFORE** your camp start
date.

Please put all completed forms
in **alphabetical order** when mailing
to Deer Run.

WAIVER OF LIABILITY NOTICE

Please read carefully before signing; you give up certain rights by signing this document.

I, _____
(Name of Camper—PLEASE PRINT)

attending _____, 20_____
(Dates of Camp)

with _____
(Group or Church Name if Applicable)

understand that high adventure activities such as high and low ropes/challenge courses, climbing, rappelling, mountain biking, hiking, backpacking, cave exploring, canoeing, swimming, paintball, white water rafting, and camping involve risk of injury or death from various hazards, both obvious and obscure, including but not limited to, injury by acts of other group participants, falling, being struck by falling objects, equipment failure, and other risks or occurrences not set forth in this document.

By signing this document I accept and assume responsibility for any and all such risks, whether or not specifically itemized herein, to include travel to and from activities, and I acknowledge that Deer Run Retreat Center and/or Deer Run Camps, its employees, associates, corporate officers, board members, property owners, family of the same and any organization that Deer Run Retreat Center and/or Deer Run Camps represents or contracts with shall be held harmless and blameless in the event of such an aforementioned mishap. I know and am prepared for the aforementioned risks and will not look to any entity or individual nor hold them responsible for my or my child's well-being or the protection from such risks, whether or not those risks are known or unknown by those organizations or individuals.

In consideration of participating in any and all activities with Deer Run Retreat Center and/or Deer Run Camps I, on my behalf and on behalf of my heirs, assigns, and representatives, do hereby irrevocably release Deer Run Retreat Center and/or Deer Run Camps, its employees, associates, corporate officers, board members, property owners, family of the same and any organization that Deer Run Retreat Center and/or Deer Run Camps represents or contracts with, their successors and assigns from any and all claims which involve any nature of injury or death or damage to persons or property that may occur as a result of my or my child's attendance or participation in such aforementioned activities.

By signing this I also give permission to Deer Run Retreat Center, Deer Run Camps, and photographers or videographers assigned by Deer Run Retreat Center to use any written quotes, photos, or video footage for promotional purposes, for online portfolios, and for online photo galleries which include the above named participant.

Signature (Parent or Legal Guardian Signature, if a minor) Date

Printed Name _____

Address _____

City, State, Zip _____

E-mail _____

Home Phone _____ Mobile Phone _____

NOTARY REQUIRED IF THE ATTENDEE IS YOUNGER THAN 18 YEARS OF AGE.

_____ sworn to and subscribed before me

on this the _____ day of _____, 20_____.

Notary Public Signature My Commission Expires

DEER RUN CHRISTIAN CAMPS 2010 CAMP INFORMATION

FINANCIAL INFO • PAYMENTS • FORMS

- 1) Campers are not registered until a minimum of \$75 per camper is received by the camp office.
- 2) **The following forms are due the camp office as soon as possible and no later than 14 days before the camp start date.** Forms are on pages 5-8 of this document. Please mail or hand deliver (DO NOT FAX) the completed forms.
 - camper transportation release form (If registering for Deer Run drop off & pick up transportation locations)
 - notarized waiver of liability notice for each camper (Church Groups: Please send forms in alphabetical order.)
 - notarized medical release form for each camper [2 pgs] (Church Groups: Please send forms in alphabetical order.)NOTE: If you are registering less than 14 days before the camp start date, the forms are due as soon as possible and before the first day of camp. Please mail or hand deliver to the office at Deer Run Retreat, 3845 Perkins Road, Thompson's Station, TN 37179.
- 3) Early bird registrants may pay balances in 2 payments: 4/1/10 and 5/15/10.
- 4) Balance payment is due 5/15/10 if registering before this date.
We recommend registering as early as possible since camper spaces fill up quickly.
- 5) If registering after 5/15/10, full payment is due when registering.

CHURCH GROUPS

- Adult leaders or counselors attending camp must register & reserve a camper space.
- Campers may register as a group and pay the deposit and final balance with a church check or credit card (Visa, MasterCard, or Discover) OR campers may register individually. Either way, please call the camp office to receive a code for the \$20 church group discount. All registrants should enter this code on page 2 of the registration form so the camp office will know the camper is a part of the church group.

POLICIES

CAMPER CANCELLATION

All camper cancellations must be made IN WRITING and received in the camp office at least 14 days prior to the camp start date. Send a cancellation notice to Registration@DeerRunRetreat.org or by U.S.P.S. to Deer Run Christian Camps, 3845 Perkins Road, Thompson's Station, TN 37179.

Any paid deposit or paid balance may be transferred to another week of camp or another camper within the same household. No refunds will be given. However, if requested, you can receive a tax deductible donation receipt for the amount paid.

CAMPER EARLY DROP OFF/LATE PICK UP POLICY

A \$20 administrative fee will be charged for each 15 minute increment of time that a camper is dropped off earlier or picked up later than regular camp hours or extended care hours (extended care must be registered and paid for in advance). This administrative fee applies to both Day and Overnight Camps and applies to each individual camper.

CAMPER BEHAVIOR

Campers who fail to comply with camp guidelines, cause harm either physically or verbally to other campers, or are disruptive to another camper's experience may be sent home. The Camp Director will initially deal with behavior issues by discussing the problem with the camper. However, if positive results are not attained, then parents or guardians will be notified to pick up the camper from camp and the camper may not return during that camp session.



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CAMPER "WHAT2BRING" LIST

PLEASE LABEL ALL PERSONAL ITEMS!

ALL CAMPERS (BOTH DAY AND OVERNIGHT CAMPS)

- A great attitude—expecting great things to happen!
- Bible, pen, notebook, etc.
[If your camper does not own a Bible, please inform our staff in advance and one can be provided at no cost.]
- Insect repellent
- Swimsuit (one-piece for girls), sunscreen, beach towel, & waterproof sandals for beach & water games
- Rain gear and/or light jacket
- Casual clothing & athletic shoes for recreational activities
- Spending money for snacks, t-shirts, DVDs, etc. Camp Bucks can also be purchased at registration time or at the Camp Store during camp weeks so campers do not have to keep up with money and loose change.
- Backpack or other bag to carry belongings around camp
- Plastic bag for wet items

Note: Any prescription medications or over-the-counter meds must be in the original container and clearly labeled with the camper's name & dosage information. Please give these to the camp nurse upon arrival and list all information on the medical release form.

DAY CAMPERS

A sack lunch & drink for Monday–Thursday in an insulated lunch box each day, both labeled with the camper's name. Also bring a sack lunch on Friday if not registered for the Family Day lunch.

OVERNIGHT CAMPERS

- Loose-fitting pants or shorts & short or long sleeved shirts for adventure recreation
- Boots or shoes appropriate for hiking
- Sleeping bag or bedding for twin mattress plus pillow
- Toiletries: soap, shampoo, personal items, etc.
- Bath towels & washcloths
- Watch & alarm clock
- Flashlight & extra batteries

WHAT NOT TO BRING

- NO chewing gum/bubble gum or snacks. .
- NO tobacco products, alcohol, illegal drugs, firearms, fireworks, weapons including pocket knives
- Nothing electronic: cell phones, pagers, handheld games, or personal listening devices (iPods, Mp3 players, etc.)
- Nothing valuable (Deer Run Retreat and Deer Run Christian Camps are not responsible for lost or stolen items. Items left behind by campers will be placed in a Lost & Found area for a short time so they can be claimed.)

WHAT NOT TO WEAR

- NO sleeveless shirts, spaghetti strap tops, or tank tops
- NO tight-fitting clothes
- NO short shorts or short skorts, or any length skirts
Fingertips should not be below the bottom of shorts or skorts when standing with arms at side.
- NO bikinis, two-piece bathing suits (unless covered with a dark t-shirt at all times), or speedos
- NO clothing with offensive language or promoting persons, bands, or products which are offensive.