

Adventure Camp Permission Slip & Liability Release

I, the undersigned, give my child permission to participate in all activities included in Rockingham Christian Church's Adventure Camp. I give the RCC Youth Leaders permission to provide transportation for my child during this retreat. I understand the nature of the activities included during the retreat, and I release RCC and its leaders from all liability, other than normal supervision and care.

In case of an accident of any kind, I will not hold Rockingham Christian Church or its leaders liable. In the case of an emergency, I understand that the RCC Youth Leaders will try to contact me immediately. If I am not able to be reached, I give the leaders permission to have my child treated at a medical facility.

(Please complete the Student Medical Information page on the reverse side of this permission slip.)

Student's Name:

Parent's Signature:

Place
Stamp
Here



5 INDUSTRIAL WAY, UNIT #2
SALEM, NH 03079

RCC Middle School

Adventure Camp



Who is it for?
Fall Middle School Students

When is it?
~~July 6-8, 2009~~
Aug. 10-12, 2009

Where are we going?
Cove Campground, Conway, NH

How much does it cost?
\$50 per student

What's Going on?

Adventure Camp is a 3-day retreat for students going into grades 6-9 in the fall. For students going into 6th grade, parents must be confident that their child is able to be away from home for this time. On Monday, Aug. 10, our group will meet at the RCC parking lot at 8am. We will then head to Cove Camp Ground in Conway, NH. We will return on Wednesday, Aug. 12 around 8:30pm.

During the trip, students will sleep in tents, eat meals prepared around the campfire, grow through classes and worship, and experience adventurous excursions (such as hiking, team building exercises, and canoeing)! The campground is located on Conway Lake, which will provide students with a beautiful place to swim.

We will be joined by two other middle school youth groups from Eastpointe Christian Church (Portland, ME) and Londonderry Christian Church. Hopefully, there will be about 40 students participating!

Students should bring a sleeping bag, pillow, modest swimsuit, towel, toiletries, Bible, pen, paper, bug spray, flashlight, hiking shoes, and a sweatshirt. Students can also bring outdoor sports equipment or a fishing pole. Please leave cell phones and electronics at home.

The cost of Adventure Camp is \$50 per student. A \$25 deposit is due by June 28. Each student needs a completed Medical Form and Permission Slip in order to go. This is the highlight of the summer for our middle school group, so you don't want to miss it. Friends are welcome to come along, so spread the word!

As always, if the cost is an issue, please talk to Steve, as we do not want that to be the reason you do not attend!

WHY CAMPING?

In the Bible, many people traveled into the wilderness to get away from the busyness of life and to be refreshed by God. For middle school students, this retreat will provide a time to enjoy the beauty of creation and develop a relationship with God. Being in the wilderness will also provide them with a time to build great friendships and have exciting adventure experiences.

"Through everything God made, they can clearly see his invisible qualities—his eternal power and divine nature."

Romans 1:20

Daily Schedule

8:00am	Breakfast
8:30	Morning Devotion
9:00	Elective #1
9:45	Break
10:00	Elective #2
11:00	Morning Swim
12:00pm	Lunch
1:00	Adventure Activity
5:00	Clean Up
6:00	Dinner
7:00	Campfire Worship
8:30	Evening Competition/Game
9:30	Campfire Snack
10:00	Free Time
10:30	Get Ready for Bed
11:00	Lights Out

Student Medical Information

Student name: _____
(Last, first, middle initial)

Date of birth: _____

Parent/Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ cell: _____

Alternate emergency contact: _____

Relationship: _____ phone: _____

Student's primary care physician: _____

Insurance: _____

Policy/group number: _____

Policy holder: _____

ALLERGIES: _____

Medical/other conditions: _____

Medication(s): _____

Dosage: _____ instructions: _____

My child may be given Tylenol: yes _____ no _____

If yes, preferred dosage: _____

*All prescription medications must be turned in to Steve unless prior arrangements are made with him.