



JUNIOR HIGH | JULY 9-13

2018 Junior  
High Camp  
Parent Pack!

# Camp is Here!!!

Well, almost... parents, camp is right around the corner, and here is the inside scoop on everything you will need to know for one amazing week in the life of your Junior-High student! We will be staying at the Acadian Baptist Center, in Eunice, LA and be participating in Camp Fuego's Junior High Week! This week has the potential to be an amazing experience in the life of your student and our student ministry. Thank you for investing in the life of your student by allowing them to attend camp, and for trusting Grand Avenue Baptist Church with your student. This is an awesome responsibility, and one we do not take lightly. **If you have any questions, at any time, please feel free to contact me at [josh@grandfamily.net](mailto:josh@grandfamily.net) or call me at 479.459.1305**

Inside this packet, you will find everything you will need for camp. Please help us stay organized and on top of our payments for camp by following closely the dates found inside this pack. Looking forward to an amazing camp experience!

Josh

## Information You Need to Know!

- Monday, July 9 – Arrive at the Refuge at 6:45 AM to load.
- Leave the Refuge (GABC) promptly at 7. Be on time, you will be left!
- Bring Breakfast with you for the drive!
- Transportation this year is a Chartered Bus!
- Return to GABC on July 13 around 8:30PM.
- **Final Camp Payment is Due June 24th !!**
- No electronics other than an iPod. NO iPads, Kindles, PDA's, Palm Pilots, Beepers or Pagers... Unless your toothbrush is electric. Then please bring it.
- We are not responsible for lost or stolen items.
- Cell Phones - If they become a problem they will be taken away. Josh and your adult chaperones will decide when a problem is a problem.
- Parents - You will receive a phone call during the week, as well as multiple updates through social media outlets on how your student is doing, as well as pictures of your student participating in camp.
- Please be on time for departure. You will be left!
- Camp is in Eunice, Louisiana at the Acadian Baptist Center.
- **Check out Fuego and what's going on during the week at [www.campfuego.com](http://www.campfuego.com)**

# Camp Financial + Release Deadlines

Deposit - \$50 - If not already paid, this is due ASAP. This is the only way to reserve your students spot, and it is non-refundable.

Payment 2: \$100 is due April 29.

Final Payment (Balance) Due June 24.

**Total Cost for camp is \$250 + 3 Fast-food  
Meals while traveling.**

-----  
GSM Release form Due: June 24.

Fuego Release form Due: June 24.

**BUT!!! You can turn in any payments and  
forms early!!! That would be awesome!**

# What a week at Camp Fuego will look like!

(Monday and Friday are abbreviated because they are arrival/  
departure days and will be a little bit different.)

## The Schedule

8:00 AM	Breakfast
9:00 AM	Quiet Time
9:30 AM	Sunrise Celebration
10:00 AM	DG Time
11:00 AM	Seminars
12:01 PM	Lunch
1:00 PM	Optional Rec/Free Time/Pool Fuego Fun
4:00 PM	DG Time
5:01 PM	Dinner
6:15 PM	Worship
7:45 PM	Church Group
8:45 PM	Break
9:15 PM	Tues & Wed - Sundown Celebration
10:00 PM	Thursday - Camp Fire
10:15 PM	Break (M-W) Canteen Open
10:30 PM	Late Night Rec (M-W)
12:00 AM	In Cabins
12:20 AM	Lights Out

# What to Bring to Camp

- Bible (the kind made of paper)/Notebook/Pen
- Clothes
  - shorts and t-shirts during the day; “ok to get dirty”
  - shorts and shirts for afternoon; casual evening clothes
- VERY MESSY CLOTHES
- Swimsuit; LADIES= One Piece; Fellas = NO SPEEDOS.
- Something to put your wet/dirty clothes in.
- Pajamas
- Toothbrush, D.O. for your B.O., Shampoo, Towels
- Pillow, sheet, sleeping bag
- Sunscreen, bug-spray, flashlight
- Shoes - more than one pair
- WATER BOTTLE - Ever heard of Louisiana Hot Sauce? The inspiration comes from Louisiana Summers...
- Snacks or snack money + Souvenir Money
- Whatever else you think you might need!

# What to Leave at Home

- Ladies - no short shorts or spaghetti strap tank tops
- Guns; Drugs; Porn; Tobacco; Alcohol- Anything that might distract you from God or endanger others.

\*\*If you have a question if you can bring it, that's probably a good sign the answer is no. If you have a real question, please contact Josh at [josh@grandfamily.net](mailto:josh@grandfamily.net)



## Minor Participation Authorization and Consent to Emergency Medical Treatment Form

I, the undersigned, certify that I am the parent or legal guardian of \_\_\_\_\_  
(Hereafter the "minor child").

I hereby give my consent to have my child participate in the following activity of **Grand Avenue Baptist Church** : \_\_\_\_\_  
(Hereafter "the activity") on or about \_\_\_\_\_, 20\_\_\_\_\_.

I recognize that there are risks involved in participating in this activity and hereby assume all risk of injury, harm, damage, or death to my minor child with his/her participation in the activity.

To the fullest extent permitted by law, I release **Grand Avenue Baptist Church**, its trustees, officers, directors, employees, agents and representatives from any injury, harm, damage or death which may occur to my minor child while participating in the activity and agree to save and hold harmless **Grand Avenue Baptist Church**, its trustees, officers, directors, employees, agent and representatives from any claims arising out of my minor child's participation in the activity.

Further, being the parent or legal guardian of the minor child, I do consent to any medical, surgical, x-ray, anesthetic, or dental treatment that may be deemed necessary for my minor child. I understand that efforts will be made to contact me prior to treatment but, in the event I cannot be reached in an emergency, I give permission to the activity leader to make the decisions necessary for treatment. Should there be no activity leader available, I give my permission to the attending physician to treat my minor child. As parent or legal guardian, I understand that I am responsible for the health care decisions of my minor child and agree that my insurance plan is the primary plan to pay for the medical, dental, or hospital care or treatment that is given to my minor child. Any insurance policy of the church or organization sponsoring this event will be used as the secondary coverage.

Executed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature of Parent or Legal Guardian: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Best Phone Number to Reach You: \_\_\_\_\_

Insurance Provider: \_\_\_\_\_ Member ID: \_\_\_\_\_

Group: \_\_\_\_\_ TSHIRT Size: \_\_\_\_\_

# Camp Fuego Waiver & Release

All participants in Camp Fuego Events must have a signed Waiver & Release Form, including adults 19 years and older. Participants under 19 must have the authorized signature of a Parent/Guardian. Substitute Forms will not be accepted.

Name of Church: \_\_\_\_\_ City/State: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Sex:  Male  Female

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Work/Cell Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Camp Week Attending \_\_\_\_\_ Current Grade or Grade Completed in May of this Year \_\_\_\_\_

T-Shirt Size  XX  XL  L  M  S

**Please check which one best describes the attendee (more than one may apply):**

Student  Discussion Group Leader  Student Leader  Adult  Minister

**Consideration** .I acknowledge the personal benefits accruing to me (and my child, as applicable) by reason of participation in the above described event and am aware of the activities in which I, or my child, will be involved through said participation.

**Release /Indemnification** .I hereby, in consideration of such benefits and other good and valuable consideration received, consent to the above listed participation and release absolutely, forever discharge, hold harmless and covenant not to sue Camp Fuego, Camp Bethany, and/or Acadian Baptist Center, its directors, employees, agents, volunteers, and affiliates (Camp Fuego, Camp Bethany, and/or Acadian Baptist Center) from any and all present or future liability, claims, demands, actions or rights of action, whether asserted by me or a third party arising out of my (or my child's) participation in event activities (the "Claims"). I agree to indemnify Camp Fuego, Camp Bethany, and/or Acadian Baptist Center for any such Claims brought by me or a third party from any costs associated with defending or litigating such claims, including but not limited to attorney fees, costs and legal expenses.

**Assumptions of Risk** .I am aware of the risks associated with participation in the above event and do hereby voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death, that may result from participation in event activities.

**Medical Emergency** .In the event of injury or a medical emergency, I understand that the church's group leader, not Camp Fuego, Camp Bethany, and/or Acadian Baptist Center, will be responsible for the medical care of all attendees. It will be the church group leader's responsibility to assess medical needs, obtain and consent to appropriate medical care, transport persons in need of medical care and contact parents or guardians of minors. I release Camp Fuego and Camp Bethany from any and all liability related to medical treatment. In addition, I assume the risk and financial responsibility for any injury resulting from the attendee's participation in all Camp Fuego, Camp Bethany, and/or Acadian Baptist Center events.

**Camp Bethany Acadian Baptist Center Recreation Addendum** -The recreation programs at Camp Bethany and Acadian Baptist Center strive to offer fun, safe, and challenging activities that engage the whole person--body, mind and soul. Program staffs are trained and as a team committed to your rewarding experience with safety as their highest priority. They have done everything possible to mitigate any risks involved in their recreation programs. However there are inherent risks to participation in recreation activities, including but not limited to, initiative games, high and low challenge course, outdoor education, paintball and aquatics. You could experience any of the following -elevated heart and respiratory rates, uncomfortable group dynamics ,climbing or descending unpredictable and possibly slick or uneven terrain, crossing narrow wires and logs ,jumping, running, climbing/descending steep rock faces, traveling long distances in remote settings, carrying weight on your backs and shoulders, unforeseen forces of nature or weather, any of which could result in injury/illness that could result in loss of life, limb, and/or property. For more detailed information about the recreation programs offered at Camp Bethany, see [www.campbethany.com](http://www.campbethany.com), for Acadian Baptist Center, go to [www.abccamp.com](http://www.abccamp.com)

**Understanding** .I represent and acknowledge that I have completely read and understand this document and all its terms and all matters referred to herein, that I have had an ample opportunity to obtain the advice of counsel and that, by signing this document, I understand that I am relinquishing legal rights and remedies that may have otherwise been available to me. I understand that this Waiver and Release shall be construed as broadly and inclusively as is permitted by applicable law and agree that if any portion of this document is held invalid, the remaining shall continue in full force and effect. To the extent the restriction on filing lawsuits is deemed unlawful, I agree to submit any Claims to a Christian conciliation/mediation organization for binding resolution.

**Media Consent** .I give my consent and permission for the taking of photographs and/or video of me (or my child) during the described event and waive and/or assign any and all rights (including copyright) in such media to Camp Fuego, Camp Bethany, and/or Acadian Baptist Center. Camp Fuego, Camp Bethany, and/or Acadian Baptist Center, as the sole owners of such media, shall have the exclusive right to control and determine the use, display, performance, reproduction and dissemination of any such photographs and/or videos.

**Copy to Camp Facility** .It is understood and agreed that a copy of this form shall be treated as authentic and binding as the original and that a copy of same shall be provided to the camp facility that is hosting each event.

**CAUTION:READ THIS DOCUMENT CAREFULLY BEFORE SIGNING.THIS IS A GENERAL RELEASE AND INDEMNIFICATION OF CLAIMS.**

**Please check, which applies:**  Parent/Guardian  Attendee 19 years of age and older

Signature: \_\_\_\_\_ Date \_\_\_\_\_

If you are a Parent/Guardian of an attendee who is under 19 years of age, please include the following.

Your Name: \_\_\_\_\_

Relationship to Attendee: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Insurance Policy Number \_\_\_\_\_ Group Policy Number \_\_\_\_\_

Group Policy with \_\_\_\_\_

Coverage Verification Phone Number \_\_\_\_\_

List any medical, physical, or other limitations \_\_\_\_\_

Allergies \_\_\_\_\_ Last Tetanus Shot \_\_\_\_\_

Current Medications \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Phone \_\_\_\_\_