

Dear Parents,

Summer Camp 2024 is Monday, July 1 through Friday, July 5, at Student Life Camp hosted by John Brown University in Siloam Springs, AR. Camp is an amazing experience for your student to connect with God and others. Every year, students come back talking about this being one of the greatest weeks of their lives. Space is limited, so please register soon through signups on the Church Center App!

Cost: \$390 per student. A \$50 deposit is required to secure your student's spot.

Final payment is due by May 31st, 2024, at noon (if you need a payment plan, please communicate it prior to this date). Payment plans are available in addition to a limited number of partial scholarships and must be requested using the scholarship application form in the Church Center App.

<u>Refund Deadline:</u> If you find your student is unable to attend after you have made a payment toward camp, refund requests must be made by Friday, April 26th.

Camp Costs Include:

- Camp T-Shirt
- Meals
- Housing
- Transportation to and from camp
- All camp activities

<u>Stay Informed</u>: "In the Know" email updates are Antioch Student Ministry's main form of communication. If you are not yet subscribed to "In the Know," please sign up at <u>antiochbbc.org/students.</u>

Camp Check-in and Pick-up

- Check-in begins Monday, July 1st at 7:30 with a parent meeting to follow at 8:30. Buses will depart promptly at 9:15.
- We anticipate returning to Antioch at approximately 2:00 PM on Friday, July 5th. Please be watching our social media pages for arrival updates that morning.

Packing List – Please limit items to 1 suitcase, plus a pillow and sleeping bag:

- Sack lunch to eat on the way to camp (or beforehand).
- Casual clothing for five days, plus clothes that can get messy.
- Tennis shoes.
- Sheets (twin size) or a sleeping bag, a blanket, a pillow, etc.
- Towels and washcloths.



- Personal hygiene items.
- Bible hard copy (do not plan on using the one on your phone or other electronic version).
- Pen, notebook, etc.
- Extra spending money.

Stuff Not to Bring:

- Spaghetti strap tops or small tank tops.
- "Short" shorts or skirts. (Stand with you arms by your side. If your fingertips are touching your skin, your shorts or skirts should be longer for camp.)
- Bikinis or two-piece swimsuits (unless covered with a dark T-shirt and shorts).
- Speedos.
- iPads/tablets or video games.
- Tobacco, drugs, alcohol, or weapons.
- Fireworks.
- Water balloons.
- Phones We ask that you leave all cell phones at home so as not to be a distraction during camp.

For your convenience, we have posted all the camp information and paperwork on the Student Ministry page of our website, <u>antiochbbc.org/students</u>. The only paperwork you need to turn in is the ABBC Parental Consent Form for each student you are sending to camp, otherwise, registrations are all online this year.

Yours in Christ,

Tim Maserang

Student Ministry Director

ABBC PARENTAL CONSENT FORM

Child's Name:

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 minor child participate in the following activity of Antioch Bible Baptist Church: <u>Student Life Camp 2024</u> (hereafter "the activity") on or about <u>July 1st – July 5th</u>.

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 in connection with his/her participation in this activity.

To the fullest extent permitted by law, I release Antioch Bible 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 Antioch Bible Baptist Church, its trustees, officers, directors, employees, agents 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 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.

Said minor is covered by hospitalization insurance:	YES	NO	
Insurance Company:			
Policy Number:			
Allergies:			
Special Medication:			
Participant's Signature, if 12 years or older:			
Parent's or Guardian's Signature:			
Parent's or Guardian's Printed Name:			
Date:			

(The signature of only one parent or guardian is required)