

To: Parents/Guardians/Students

From: First Baptist Church of Fair Oaks Kids Ministry Team

Date: January 7th, 2024

Re: Kids Camp 2024 (Wolf Mountain)

Dear Parents,

It's time once again to register for Summer Camp. Our Kids Ministry is trying out a new camp this year called "Wolf Mountain". Wolf Mountain Conference Association is located just up in the foothills of Grass Valley, Ca.

What is Wolf Mountain Junior Camp all about?

Wolf Mountain's Junior Camp is designed specifically for students in grades 3-6. The program includes Bible study, guided quiet times, recreation, worship, personal tracks, and "night life" activities for everyone in the church group.

Key facts and dates:

Total Cost: **\$460.00**

February 18, 2024 \$100.00 NON-REFUNDABLE Deposit 1 of 2

April 7, 2024 \$100.00 NON-REFUNDABLE Deposit 2 of 2

June 1, 2024 Community work project fundraiser day – (must work this event to receive

any money from fundraiser. Sorry, we cannot accommodate make-ups.)

June 9, 2024 Remaining Balance (\$\$) and all paperwork/forms <u>due</u>.

June 17-22, 2024 Dates of Camp



Wait!!! I have some questions!

Q: How can my student pay for this expensive event?

A: Your choice:

1) Your family can pay the full cost of camp, or 2) Your student can raise funds with our fundraiser program.

We only have 1 fundraiser for camp. Your student works our <u>community work project fundraiser</u> on <u>June 1, 2024</u>. Time/Location TBA. We will be picking up trash at various parks in the area.

Your student could potentially raise the entire remaining necessary \$250.00 balance very easily with this fundraiser. Please put June 1, 2024 on your family calendar if you wish to participate.

*** Your student must participate in this event **on this day** to receive any fundraiser money to their student account. We simply cannot accommodate alternative make-up work days.

One more Special opportunity for Kids Camp is the opportunity for two \$30 discounts.

- \$30 Discount is applied if <u>registration paperwork</u> and <u>first deposit</u> are received before or on <u>Sunday Feb 18th</u> at the Summer Camp registration event after church in the Small Fellowship Hall.
- \$30 Discount is applied to balance if second deposit is received before or on Sunday April 7th.

Q: What does the Cost Breakdown look like?

A: Event cost \$ 450.00

Total Deposit \$ 200.00

Balance \$ 250.00

-Fundraiser \$ ______

=NEW Balance \$ (Due June 9, 2024)

Q: How do I secure a spot for my student?

- 1. Pay the first \$100.00 NON-REFUNDABLE Deposit by February 18, 2024
- 2. Complete and turn in the "Parental Authorization/Consent Form" by February 18, 2024
- 3. Pay the second \$100.00 NON-REFUNDABLE Deposit by April 7, 2024

Q: How does my student get to camp?

We will travel in private vehicles from First Baptist Church Fair Oaks. All drivers are screened and certified by the church and covered under the church's insurance. Your child's safety is our #1 concern. Students should arrive at the church parking lot at 1:30pm on June 17th and will return at approximately 11:30am on Saturday June 22nd.

Q: Where is Wolf Mountain and Can I contact my child?

(send camper mail to): Camper Name c/o Wolf Mountain Camps - Junior 16555 Jericho Road Grass Valley, CA. 95949

For Emergency purposes ONLY:

Wolf Mountain Camp Phone # (530) 273-8709.

Use student name and church to get message to group leader.

Still have Questions? Contact the Church Office

(916) 966.2295

dbarber@fbcfo.com



Wolf Mountain Camps 2024 SUMMER CAMP REGISTRATION

Office Use	Registered	Signatures	
	Contact Info	Finances	
	Camper Details	Receipt	
	RTM	Date	Date

O Male Camper	O Female Camper		
O Male Sponsor	O Female Sponsor		Parent / Guardian Information
Namo			For campers under 18 years of age
Name			Nome
Age Date of Bi	rth	Grade	Name
		in September	Relationship
Mailing Address			
			Phone #
City	State	Zip	O Home O Cell
Phone #			Email_
Phone #O Home O Cell			 O Mark here if you do NOT want to receive periodic updates regarding the ministry of Wolf Mountain Camps.
Email			Emergency Contact
O Mark here if you do NOT want to re	seive periodic updates regarding the	e ministry of Wolf Mountain Camps.	Entergency Contact
Cabin Mate Request	one person—we recommend not a	sibling and within one school grade.	Name
_	ndividual	•	
o onaron oroup	Idividadi		Relationship
Church Name			
			Phone #
Church Location		State	en e
651 565 61			Duran and Countries
	NE OF THE FOLLOV		Dress and Conduct
Junior Camp	Teen Camp	Horsemanship Camp	Guys and girls should plan to wear clothing that allows them to remain an active part of camp. If wearing shorts,
☐ JR1—June 10–15	☐ TN1—June 10–15	☐ HM1—June 17–22	please choose a longer style (like Bermuda shorts) where the length falls closer to the knee. Pants or leans
☐ JR2—June 17–22	☐ TN2—June 17–22	☐ HM2—July 1–6	are fine as well. Please avoid any clothing that does not
☐ JR3—July 15–20	☐ TN3—July 15–20	☐ HM3—July 8–13	cover the stomach or allows underwear of any kind to show. Wolf Mountain reserves the right to ask any
_	☐ TN4—July 22–27	-	person to change his/her outfit if it does not comply with
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	□ 114+ 5diy 22 27	□ 11W14—Suly 22—27	these standards. Please call our office if you have any questions.
			Bullying and/or taunting will not be tolerated. Any
Payment Informatio		T	bullying will be dealt with immediately and may result in
O Charge Registration F	ee ONLY O Charge	Total Amount	expulsion from camp.
Name on Card			"I have read and agree to comply with the dress and
Card Billing Address (If o	different than above)		conduct regulations while at camp."
Cara Dinnig / lauress (ir c	more in thair above,		Signature of Registrant
			"I agree to support Wolf Mountain in their dress and conduct regulations for my child while at camp,"
Card #		A CONTRACTOR OF THE CONTRACTOR	conduct regulations for my child write at camp.
Cald #			Signature of Registrant's Parent / Guardian
Exp. Date	CVV*		
LAP. Date	CVV		

PARTICIPATION, RELEASE, AND MEDICAL AGREEMENT

Waiver must be read, signed, and dated for each individual

Registrant Signature (Parent / Guardian Signature for minors)

While we make every effort to provide a safe and pleasant environment for every camper who attends Wolf Mountain, we do require that this participation agreement be read, filled out, signed, and dated by all campers (or their parent/guardian if under the age of 18) who wish to participate in activities at Wolf Mountain.

With full knowledge, I accept full responsibility for any injury or accident that may occur to myself or my child while participating in Wolf Mountain activities. I give permission for my child to participate in activities that occur at Wolf Mountain. These activities may include, but are not limited to, swimming in the pool, canoeing, high ropes course, archery, riflery, paintball, horseback riding, and strenuous competition games.

Although Wolf Mountain has taken reasonable steps to provide equipment and skilled employees so yourself, your spouse, or your child can participate in activities for which he/she may not be skilled in, we do remind you that these activities are not without risk. Certain risks cannot be eliminated due to our camp's rural setting and without destroying the unique character of those activities. The same elements that contribute to the character of these activities can be cause of loss or damage to your property, accidental injury or illness or, in extreme cases, permanent trauma or death. We do not want to frighten you or reduce your enthusiasm for these activities, but we do think it is important for you to be informed and know in advance about inherent risks.

For promotional or marketing purposes, Wolf Mountain reserves the right to use any audio, video, and/or photography of guests or campers participating at Wolf Mountain facilities.

I, on behalf of myself, my children, my assigns and my estate, agree to release and hold harmless Wolf Mountain, its officers, board, agents or employees, for any and all claims for injuries, causes of action, or liability related to my child's participation in any activity occurring at Wolf Mountain. This release does not apply to intentional and/or willful acts of misconduct by Wolf Mountain or any of its officers, board, agents or employees.

By signing this document, I acknowledge that if anyone is hurt or property damaged during my or my child's participation in these activities, I and/or my child may be found by a court of law to have waived any right to maintain a lawsuit against Wolf Mountain on the basis of any claim which has been released herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and agree to be bound to its terms.

Medical Information	Specific Allergies
Date of last tetanus shot:	Medications, insects, food, and other
Medications taken regularly:	Allergies
Preexisting conditions:	Type of Reaction:
Specific activities to be restricted:	Treatment given
I give permission for myself or my child to attend camp at Wolf Mount primary coverage for medical aid and that Wolf Mountain will provide es sent home because of disciplinary or other problems, I will assume EMERGENCY, I hereby give permission to the physician selected by the treatment for, and order injection, x-ray, anesthesia, or surgery for myst	excess coverage. I also understand that if my child must be the additional transportation cost. IN CASE OF MEDICAL ne camp director or his agent to hospitalize, secure proper
I verify that my child is immunized against the following according to H.I. Tetanus, and Whooping Cough. (Please notify the camp if this child hat two weeks prior to camp attendance.)	
O Registrant is not immunized.	
Insurance Company	Policy Number
O Registrant is not covered by insurance	
Required Signature	

Date

Wolf Mountain Summer Camp PARENTAL AUTHORIZATION/CONSENT FORM



Student Name_			
Address			
		Phone#	
Emergency Cont	tact	Phone#	
Birthdate	Grade	Medical Insurance	
Policy #	VII.		
To whom it may co	oncern:	n for my dependent, Ir. Camp, a kids ministry activity of First Baptist Church of Fair Oaks	5.
Where: V	une 17 – 22, 2024 Volf Mountain 6555 Jericho Road Grass Valley, CA 95949		
surgical or dental diag the advice of any phys	mosis or treatment, and hosp sician or dentist licensed und	ninor has been entrusted, to consent to any x-ray examination, anesthetic, med bital care, to be rendered to the minor under the general or special supervision der the provisions of the Medical Practice Act on the medical staff of a license to office of said physician or at said hospital.	and or
		pay all costs and expenses incurred in connection with such medical and coursuant to this authorization.	denta
the minor has been en understand all reasona events and activities.	trusted while attending and able safety precautions will be I understand the possibility	sion for our(my) child to ride in any vehicle designated by the adult in whose participating in activities sponsored by First Baptist Church of Fair Oaks. I be taken at all times by First Baptist Church of Fair Oaks and its agents during of risk. I agree not to hold First Baptist Church of Fair Oaks, its leaders, empleases or injuries incurred by the subject of this form.	the
□ All stu □ Abusi □ All Sw	idents are expected to conc we or disruptive behavior w vimwear will be in good tas		
of my child's belongin other illegal substance activities and understa the well-being of othe	gs in the event that there is es. I acknowledge the impor- and that such searches will o rs may be at risk due to the	by grant explicit permission for the trip leader or volunteer staff to conduct a substantial reason to suspect the presence of drugs, alcohol, weapons, stolen, cance of maintaining a safe and secure environment for all participants in stude only be carried out when there is ample cause to believe that my child's well-be possession of prohibited items. This consent is given voluntarily, with a shared everyone involved in the program.	or any ent eing or
Should it be necessary responsible party of F		home due to medical reasons or otherwise, the undersigned shall be contacted	d by
		Fair Oaks liable for any injuries to my child that are caused s/her negligence while participating in this event.	<u>i by</u>
Parent/Guardia	n Signature	Date	
		Parent Email	