

Hello, Parents!

Forest Hill Youth Adventure Camp is just around the corner! We are excited about this trip and have been praying for your student and for their time during camp. Please use this information to prepare your student for the trip.

Camp is July 22-27. We have chartered buses for transportation. Check-in for the trip will be at our South Park campus (7224 Park Rd.) and begins Monday, July 22, at 9 AM. We will return to the South Park campus on Saturday, July 27, between 2:00 and 3:00. Your student will let you know our arrival time on the way home.

Here are some important things that need to be completed:

- **There are several waivers that must be completed by June 15.**
 - Our host requires everyone to fill out the Medical Release form and their Media Consent form. **You can find links to both of these [here](#).**
 - This packet also includes a hard copy waiver from the camp where we are staying, Ocoee Retreat Center. **Please print and sign it and bring it with you to registration. If you are unable to print it, we will have copies at drop-off. **Your student cannot get on the bus without this waiver.****
 - Forest Hill has a Medication Policy, included in this packet. All students are required to turn in all medication at check-in. **Please review the form and bring your completed form to check-in.**

Ocoee's camp has a rich history, and we are excited about the adventure components of this camp! Your student will have a day packed with Bible teaching, small groups, group activities, and lots of time to do the lakefront activities. Please use the packing list to guide what to pack. Your student needs to pack 2 sets of clothes for each day. We recommend going to Goodwill to purchase some t-shirts and shorts that can just be thrown away. **It is going to be hot, so be sure they bring a large refillable water bottle. They can bring snacks, but please make sure they are nut-free. Ocoee will be made aware of any allergies and dietary needs as indicated on the registration form, and we will have options for those students.**

Students can bring cell phones, but please note that they will be collected at certain times during camp. Cell reception and Wi-Fi will be very spotty, so please prepare your students for that.

Lastly, please send spending money with your student. We will be buying lunch on the way there and the way back. **We will likely eat at a fast food place, so please send at least \$10 for each meal (\$20 total).** The camp also has some things for sale and is cash only. They have items like candy (mostly chocolate options), sodas, waters, stickers, magnets, and t-shirts for sale. T-shirts are \$25, waters are \$1, and candy and sodas are \$2 each.

If you'd like to take a look at the camp where we are staying, you can visit <https://adventurecocee.com>. Please note that we will not be rafting! 😊

Should you have any questions prior to the trip, please reach out to nextgenevents@foresthill.org.

During the trip, Peter Bostancic will be the Forest Hill contact. His number is 704-572-3380. Keep in mind his cell reception will be spotty too!

Blessings,
Forest Hill Youth Adventure Camp Team

About YCM



Mission

We want to love kids, tell them about Jesus and serve the Youth Workers and Volunteers who care for them in the Church.

We seek to:

- Present Jesus Christ to young people in such a way that they can make a non-pressured decision for Him
- Nurture Christian kids in their walks with Jesus Christ
- Equip & train youth workers to be more professionally competent in their calling
- Strengthen and serve as a resource to the local church by providing a variety of high quality youth ministry programs and resources.

What We Believe

We believe that the Bible is the true Word from God, and that it can be trusted in all matters of life, and that we need to model our lives after its instruction. We believe in the Trinity of God, who is comprised of the fully equal Father, Son and Holy Spirit. We believe that all people, young and old, need salvation because we are all sinful and unrighteous. Jesus is the only way to get right with God, and by trusting Him, turning from our sins and receiving Him, we can have eternal life with God in heaven.

Youth Conference Ministries (YCM) is called to support and assist the local Church, Youth Pastors and Youth Leaders in leading and teaching young people to follow and trust in Jesus Christ.

2024 Theme - Treasure

Our theme this year is treasure, and our desire is for students to examine their lives and hearts to see what is most meaningful to them and what is their treasure. Then, we want to show students that a relationship with Jesus is the only lasting and real treasure in this life. Pursuing Him will take them on an incredible adventure and provide different riches than what the world offers. It is not an easy excursion and a relationship with Jesus does not guarantee a pain-free life, but it is a worthy journey. The treasure that they find is priceless .

We also want this week to be a time when both youth and adults feel extremely loved and cared for. All of our youth activities are geared toward this, and we have some time set aside for adults that we hope will also make them feel loved. We have an incredible planning team and work crew and want to help each church grow closer together as they also grow closer to Christ. We are here to minister to and serve you. Please let us know how we can best do this.

We treasure your input, and we treasure you!

We are illustrating our treasure theme through the idea of adventure with movies like “National Treasure” and “Indiana Jones” as inspiration.

Daily themes and quiet time prompts

- What is Treasure? Matthew 6:19-21
- What Kind of Treasure am I Chasing? Matthew 6:24
- Why am I Chasing that Treasure? Luke 15:8-10
- The Most Important Treasure - Luke 15:11
- What do I do with this Treasure? Matthew 25:14-30

Preparing For Camp

What To Bring To Camp

1. Two sets of clothes per day. Your rec clothes will get dirty each day, and you will need clean ones for afterward. (Crud Day is during free time on the last day of camp. Your clothes will get very muddy and dirty so you may want to bring a set of clothes that you can throw out!) (2 sets includes undergarments!)
2. 2 pairs of (non-water) shoes: at least one pair of old sneakers (they will get wet/muddy & you will need another pair for walking around camp)
3. Plastic bags to carry home wet clothes/shoes
4. pajamas
5. Sleeping bag or blanket and sheet (twin) AND pillow
6. 2 Towels (Bathing and Recreation) & a wash cloth
7. Swimsuit (water shoes if wanted)
8. Toiletries (Deodorant, Toothbrush, Toothpaste, Soap... etc.)
9. Sunscreen, Bug Spray, Flashlight
10. Light Jacket (low temperatures at night) and rain jacket
11. WATER BOTTLE (DO NOT FORGET THIS!!!)
12. Sealable snacks and/or money for snacks
13. 2 cans of Shaving Cream (that won't sting) for Crud-War.
14. Paintball is a free-time option, long sleeves and pants are suggested.
15. If you bring a cell phone, it must be left in the cabin. We will not have good cell service and students will not have access to Wi-Fi.
16. Please DO NOT bring valuables.

Waivers

Waiver must be signed and completed before coming to camp. The **2024 YCM Medical & Media Release** and **Adventure Ocoee Waiver** can be found on the ycmhome.org website.

ADVENTURE OCOEE ASSUMPTION OF RISK, WAIVER, AND RELEASE FROM LIABILITY
(this "Agreement")

In consideration of **Adventure Ocoee LLC., Ocoee Retreat Center & Camps, Inc and ORC Properties, LLC** (collectively "Adventure Ocoee" or "AO") furnishing services, premises and/or equipment to enable me to participate in the following kinds of activities: ropes courses, challenge courses, paintball, swimming and other water-based recreational activities, and any other activities offered by or through Adventure Ocoee, and whether or not located on any property owned or leased by Adventure Ocoee (collectively, the "Activities"), I, the undersigned hereby:

1. Acknowledge and agree that the Activities entail both known and unanticipated risks that could result in physical or emotional injury, paralysis, death, or damage to me, my property, or third parties. I understand such risks cannot be eliminated without jeopardizing the essential qualities of each of the Activities. In addition, I acknowledge and agree that any use of any Adventure Ocoee equipment, facilities or property that is not expressly authorized by Adventure Ocoee staff will be considered an "Unauthorized Use" and is strictly prohibited.
2. Acknowledge and agree that all Activities are based on the "challenge by choice" principle and expressly understand I do not have to participate in any activity. I will withdraw from participation in any of the Activities which I deem to exceed my physical capabilities, skill level and/or comfort level. The Activities create an inherent risk for injuries such as, but by no means limited to: slips, falls, free falling, heat stroke, heart attack, seizure, blindness, fractures, rope burn, drowning, pinches, scrapes, twists, jolts, strains, scratches, bruises, sprains, lacerations, fractures, concussions, stings, allergies, diseases, infection and other injury. I understand participating in a group activity subjects me to the conduct of other individuals and I may be exposed to the negligent acts and behavior of other persons and activity participants.
3. Expressly agree and promise to accept and assume all of the risks inherent in any of the Activities in which I participate. My participation in each of the Activities is purely voluntary, and I elect to participate fully aware of the risks I am assuming.
4. To the fullest extent permitted by law, agree to indemnify, hold harmless and defend Adventure Ocoee, its shareholders, affiliates, agents, directors, officers, volunteers, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as the "AO Parties") from and against any and all claims, losses, damages, expenses and other liabilities (including, but not limited to, court costs and attorney's fees) arising out of or resulting in whole or in part from my participation in the Activities or any Unauthorized Use. I for myself and anyone entitled to act on my behalf, including, but not limited to my heirs and successors, hereby **RELEASE, WAIVE AND FOREVER DISCHARGE** the AO Parties from any and all claims, losses, damages, expenses and other liabilities of any kind arising out of my participation in the Activities or any Unauthorized Use even if such claims, losses, damages, expenses and other liabilities arise out of negligence or carelessness on the part of any or all of the of the AO Parties or any other participants.
5. Understand that Adventure Ocoee does not provide medical insurance to participants in any Activities, and that I am solely responsible for any medical, health or personal injury costs related to my participation in any Activities or in connection with any Unauthorized Use. I further understand and agree that I assume the risk of any medical or physical conditions I may have and I will make said medical or physical conditions known to Adventure Ocoee upon arrival on premises that may affect my ability to safely participate in any of the Activities. If a medical emergency involving me occurs during any of the Activities or as a result of any Unauthorized Use, I understand that Adventure Ocoee will attempt to contact my emergency contact listed below. If that person cannot be reached or time does not permit, I hereby give permission to Adventure Ocoee to contact emergency services for help, and give permission to a licensed physician or other licensed medical provider to provide proper treatment, including but not limited to hospitalization, injection, anesthesia and/or surgery. I hereby **RELEASE, WAIVE AND FOREVER DISCHARGE** the AO Parties from any and all claims, liabilities, causes of action, damages, demands, judgments, executions, liens and costs whatsoever in law or equity, including, without limitation, liability for death or bodily injuries to any person or damage to any property resulting from any (i) claims made against medical

providers of emergency services under this authorization, or (ii) claims made against the AO Parties for obtaining emergency medical services for me pursuant to this authorization and waiver. Adventure Ocoee strongly advises that all participants have adequate medical insurance coverage before participating in any Activities.

6. Grant and convey to the AO Parties all right, title and interest I may have in any and all photographs, motion pictures, video recordings, and any other recordings made during or about any of the Activities, and the AO Parties shall have the right to exploit such recordings throughout the universe, an unlimited number of times, in perpetuity by any and all means and media, now known or hereafter invented.

Participants of Adventure Ocoee programs are often encouraged to participate in activities, events, races and other group challenge activities which are run by independent third parties that are not affiliated with Ocoee Retreat Center (the "Other Activities"). Adventure Ocoee assumes no responsibility for any such Other Activities and you agree that participation in such Other Activities will be entirely at your own risk, and that you will indemnify, hold harmless and defend the AO Parties from and against any and all claims, losses, damages, expenses and other liabilities (including, but not limited to, court costs and attorney's fees) arising out of or resulting in whole or in part from your participation in Other Activities.

This Waiver and Release shall be governed in accordance with the substantive and procedural laws of the State of Tennessee without regard to its conflicts of law provisions. All disputes arising hereunder shall be brought in the state courts having jurisdiction in Hamilton County, Tennessee and I hereby consent to the jurisdiction of such courts, agree to accept service of process by mail, and hereby waive any jurisdictional or venue defenses otherwise available to me.

If any term or provision of this Agreement is held to be illegal, invalid or unenforceable, or the application thereof to any person or circumstance shall to any extent be illegal, invalid or unenforceable under present or future laws effective during the term hereof or of any provisions hereof which survive termination, then and in any such event, it is the express intention of the parties that the remainder of this Agreement, or the application of such term, clause or provision other than to those as to which it is held illegal, invalid or unenforceable, shall not be affected thereby, and each term, clause or provision of this Agreement and the application thereof shall be legal, valid and enforceable to the fullest extent permitted by law.

I have had sufficient opportunity to read this entire document. I have read it, I understand it, and I agree to be bound by its terms.

Participant Signature: _____

Print Name: _____

Address: _____

Phone: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Group Name _____ Date _____

TO BE COMPLETED IF PARTICIPANT IS A MINOR (UNDER 18)

Consent and Release on Behalf of Minor by Parent/Legal Guardian

I am the parent or legal guardian of the above named minor. I have read and understand this Agreement in its entirety and understand that it relates to surrendering valuable legal rights of the minor and myself. I agree to be bound by all the terms of the Agreement. I also give my consent to the participation in the Activities of the minor.

PRINTED NAME: _____

SIGNATURE: _____ DATE: _____



Forest Hill Medication Authorization Form

Please bring a printed copy of BOTH PAGES of this form with you to check-in. Emailed/mailed copies will not be accepted. All medications including supplements and/or vitamins, need to be brought in their original package or container. Place containers/bottles in a resealable plastic bag and label with the participant's full name.

Student's Name: _____

Student's Age: _____

Trip/Event: _____

Event Date(s): _____

Name of Medication	Circle days it needs to be given	Dosage (ie 1 tablet)	Frequency (ie 2x day, as needed)	Time AM/PM	Does this medication cause side effects/reactions? (i.e. drowsiness, reduces appetite)	Needs to be given with food (circle one)	Purpose of Medication
	S M T W T H F S			AM PM		yes no	
	S M T W T H F S			AM PM		yes no	
	S M T W T H F S			AM PM		yes no	
	S M T W T H F S			AM PM		yes no	
	S M T W T H F S			AM PM		yes no	

Have additional medications/vitamins/supplements? Please print a second page.



Forest Hill Medication Authorization Form

INSTRUCTIONS

This is to be filled out **ONLY** if your student will be taking medications at their trip/event. Please print **BOTH PAGES** of form and bring it completed at check-in; **DO NOT** mail this in ahead of time.

MEDICATION POLICY

- All medications including supplements and/or vitamins, need to be brought in their original package or container. Place containers/bottles in a resealable plastic bag and label with the participant's full name.
- All participants under 18 years of age are required to check in their medications with the nurse or with an assigned staff member at check-in.
- All participants under 18 years of age bringing medications, are required to submit a Medication Authorization Form completed by the participant's parent or legal guardian.
- Participants 12+ years old with respiratory conditions or who are at risk of having an anaphylactic reaction, may self-carry their inhaler and/or auto injector. A Medical Authorization Form must be filled out and submitted by the parent or legal guardian stating permission for the student to self-carry inhaler and/or auto injector if the student is under 18 years old.

EPI-PEN/AUTO-INJECTOR/INHALER AUTHORIZATION

*If your child has an **Epi-Pen, Auto-Injector, or Inhaler**, please initial next to the age-appropriate statement.*

_____ I give my student (**age 12+**) permission to self-carry his/her inhaler and or epinephrine auto-injector.

_____ I give the **leader** of my student (**age 11 or younger**) permission to carry my student's inhaler and/or epinephrine auto-injector.

I have read, understood, and agree to the medication policy, and I hereby grant permission for Forest Hill Church medical representatives to administer the preceding medications in the given dosages. Further, I authorize any emergency treatment necessary in the event of adverse reaction or overdose.

Parent/Guardian's Name _____

Parent/Guardian's phone number _____

Parent/Guardian's Signature _____

Date _____