

COLOSSIANS 2:6-7

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SUMMER CAMP 2019
- MIDDLE SCHOOL -

-DATES-

July 21 - 26, 2019

-COSTS-

\$420

\$200 non-refundable deposit
holds your spot

opportunities to reduce cost available

THOUSANDPINES.COM

Thousand Pines 2019

MISSION HILLS CHURCH
JULY 21-26

On Sunday, July 21st at 1:00 pm, Mission Hills Church will be going to Thousand Pines Christian Camp for one week and will return on Friday, July 26th around 12:00 pm. The total cost of camp this year will be \$420. There is a non-refundable, non-transferrable deposit of \$200 required to reserve your spot.

We look forward to seeing you there!

HERE ARE A FEW WAYS TO HELP YOUR STUDENT GET TO CAMP

- **VERSE MEMORIZATION** - See attached sheets for information on how your student can earn up to \$150 off the cost of camp.
- **FAMILY PLAN** If you have brothers or sisters who are also registered for *HIGH SCHOOL HUME LAKE CAMP OR MIDDLE SCHOOL SUMMER CAMP 2019, you are eligible for the Family Plan. Each student going to Thousand Pines will receive \$25 off the cost. (*Please note this deduction will only be made for middle school students and cannot be applied for high school students going to Hume Lake.)
- **MISSION HILLS CHURCH** has a need based scholarship based upon the student's financial situation at home. Financial funds are limited. We usually give aid of at least \$50 and not more than \$100. We will consider all requests but cannot guarantee the amount. Please fill out the attached *MHC Scholarship Request Form* to request scholarship help. This request form is due by July 2, 2019.
- **PAYMENT PLAN** We want to encourage you to start saving now and if possible make small payments on your camp balance. Your camp balance will be due no later than Sunday, July 14th.

QUESTIONS? Call or email Marjie Richardson, 760-759-2231 or mrichardson@missionhillschurch.org

IMPORTANT: Register at www.missionhillschurch.org/our-events/middleschoolsummercamp2019 or by filling out attached paperwork and returning to Marjie Richardson in the main office.

DO NOT REGISTER on the Thousand Pines site.

What to Bring:

Bible, notebook, pencil, flashlight, sleeping bag, pillow, toiletries, warm and cool clothes, jacket, sandals, athletic shoes, modest swimsuits, \$30 recommended spending money

What Not to Bring:

Drugs (unless prescribed by a doctor), alcohol, tobacco, fireworks, firearms, weapons or electronic devices.

PLEASE MARK PERSONAL BELONGINGS WITH YOUR NAME

Cabins are not secure; keep valuables on your person. Thousand Pines and Mission Hills Church is not responsible for lost or stolen property.

Free Time Activities:

BB Guns	*Art	Danceoke
Archery	*Skate park	Laser Tag
Swimming Pool	*Big Oak Café	Pool Night
Ropes & Zipline	*Malt Shop	Open Mic Night
*Paintball	*Underground Den	Night Hike
*Mountain Bikes	Kajabe	S'mores

*Available at additional cost

Mail:

You may send mail to the following address: (send 3-5 days before desired delivery day)

Camper Name
Church Name
PO Box 3288
Crestline, CA 92325

Weather:

Visit www.thousandpines.com/weather to check weather forecast before camp

Camp Webcam:

See your group at www.thousandpines.com/webcam

IMPORTANT: Register at www.missionhillschurch.org/our-events/middleschoolsummercamp2019 or by filling out attached paperwork and returning to Marjie Richardson in the main office.

DO NOT REGISTER on the Thousand Pines site.

Registration for Middle School Summer Camp		July 21-26, 2019
Camper Name:	Age	2019/2020 grade
Address:		
City:		Zip Code:
Parent's Name:		
Parent's Phone Number:		
Parent's Email:		
<input type="checkbox"/> Check here if you are willing to transport students to and/or from camp on Sunday, July 21 and/or Friday, July 26. We will contact you to ascertain your availability.		
<small>NOTE: The parent will be required to complete an online registration process. Parent will receive an email from Mission Hills Church which will contain a link to Thousand Pines to complete their registration, including medical information and permission forms.</small>		

Camp Payment Information

Payments for camp may be made by check, cash or credit card.

Cash and check payments can be made in person to the front office during office hours, the Connection Center on Sunday mornings or to Adam/Nate on Wednesday nights or Sunday mornings.

Credit card payments may be made online at www.missionhillschurch.org/our-events/middleschoolsummercamp2019 or by filling out the information on the next page. All credit card information will be shredded after July 21, 2019 (the start of camp).

Questions about registration and payments should be directed to Marjie Richardson at 760-759-2231 or mrichardson@missionhillschurch.org.

Credit Card Payment Information

Name as it appears on Credit Card _____

Card # _____ Card expiration _____

Billing Address: _____ City, State, zip: _____

Cardholder Signature: _____

- Non-refundable deposit \$200
- Partial Payment Amount : _____
- Full Payment of \$420

Cardholder phone number if there are any questions: _____

MHC Scholarship Request Form

SUMMER 2019

MHC Scholarships are only available to MHC students & those students who do not attend any church.

MHC scholarships are offered to help students with a financial need to attend summer camp.

All financial assistance requests are due Marjie Richardson or Nate Kowallis/Adam Hankerson no later than, Sunday, July 2nd.

You will be notified via email of your total MHC Scholarship award no later than Thursday, July 11th.

Any questions? Contact Marjie at 760-759-2231 or mrichardson@missionhillschurch.org

Today's Date _____	Camp Dates <u>July 21-26, 2019</u>
Are you requesting a scholarship from Mission Hills Church?	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
Camper's Name _____	
Parent's Name and Email _____	
Phone _____	Small Group Leader _____
How long have you attended MHC? _____	

Church Office Use Below

Mission Hills Church Scholarship Amount: _____

Memory Verses 2019

The memorization of verses is to help defray the cost of Thousand Pines Summer Camp. The money is taken off the total cost of the camp (i.e. is a scholarship).

Passages are worth \$25 each. Do all 4 sets and get \$125.

The **first** person to do all 4 passages gets a \$25 bonus for a total of \$150

Scholarship money will be given out 1st come, 1st served basis. When the budgeted scripture memorization money is gone, it is gone (so don't wait!).

Passages must be said to Marjie Richardson or Lori Hopkins (in the main office), or Adam Hankerson and be signed off by them.

Passages can be done in any order. Bring the version of the Bible you memorized with you when you recite your verses so we can follow along.

Deadline to say verses and turn in your completed sheet is Sunday, June 30, 2019.

No Exceptions These can be turned into Adam, or Marjie/Lori at the Connection Center.

Questions? Contact Adam 760-759-2169 or ahankerson@missionhillschurch.org
or Marjie 760-759-2231 or mrichardson@missionhillschurch.org.

Due by June 2nd

Galatians 2:15-21

Name _____

Leader Sig _____

Date _____

Matthew 16:13-26

Name _____

Leader Sig _____

Date _____

John 14:1-11

Name _____

Leader Sig _____

Date _____

Philippians 3:1-11

Name _____

Leader Sig _____

Date _____

Student Ministries Consent, Acknowledgment and Release

Emergency Contact and Medical Information for a Child

Child's Name	Date of Birth	Grade for 2019/2020 school year	M F Sex
Parent's/Guardian's Name		Parent's/Guardian's Name	
Home Phone	Cell Phone	Home Phone	Cell Phone
Address		Address(if different)	
City, ST ZIP Code		City, ST ZIP Code	
Alternate Emergency Contact		Cell Phone	

Medical Insurance Information

Name of Insurance	Primary Insured
Physician's Name & Phone	Policy Number
Dentist's Name & Phone	Group Number

Medical Information

List any current allergies, illnesses, physical conditions or medications:

Participation Consent and Authorization

I(we), the parents/guardians of the aforementioned student, do hereby authorize Mission Hills Church (MHC) as agents for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis treatment and hospital care which is deemed advisable by and is rendered under the general or specific supervision of any physician or surgeon licensed under the provision of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment if rendered at office of said physician or hospital.

It is understood that this authorization is given in advance of any specific diagnosis treatment or hospital care being required but is given to provide authority and power on the part of aforesaid agents to give specific consent to any and all such diagnosis or treatment deemed advisable. This authorization shall remain effective unless revoked by you.

I, the undersigned, being the parent/guardian of the aforementioned, have read and understand the above. I will keep you updated of any changes on this form. This medical release will be kept on file at Mission Hills Church to use for any future activities and/or trips.



Activity/Trip Release, Waiver, Indemnity and Assumption of Risk Agreement

The undersigned agrees as follows:

I fully understand and acknowledge that there are risks and dangers associated with Participation which could result in property or bodily injury, partial and/ or total disability, paralysis and death. These risks and dangers may be caused by my action, inaction or negligence or that of other third parties, including the Released Parties, as described below. There may also be other risks and dangers which are unknown or not reasonably foreseeable at this time.

I accept and assume the risk and responsibility for any losses and/or damages for any such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Released Parties

I hereby release, waive, discharge and agree not to initiate any form of legal action against MHC, its pastor, elders, officers, agents, employees and volunteers (collectively "Released Parties") for any and all rights, claims, liabilities, lawsuits, damages, and expenses, including attorneys' fees, of any kind, known or unknown, existing or arising in the future, including those arising from negligent conduct of the Released Parties ("Claims and Damages") which I have or may have in the future against Released Parties resulting from or related to my Participation.

I further agree to indemnify and hold the Released Parties harmless against any Claims and Damages arising out of or in any way connected with my Participation.

In consideration of the MINOR CHILD ("Minor") named below, being permitted by MHC to participate in this ALL ministry events, activities, trips, excursions and programs conducted by MHC, I acknowledge that I have read and understand the Activity/Trip Release, Waiver, Indemnity and Assumption of Risk Form, agree to be bound by its terms, and further agree to indemnify and hold Released Parties harmless from any and all Claims and Damages which are brought by, or on behalf of Minor, and which are in any way connected with such Participation by Minor. If I cannot accompany the Minor in this event, I authorize the **MISSION HILLS CHURCH STAFF PERSON(S) IN CHARGE OF THE ACTIVITY/TRIP/CAMP** to **accompany and take full responsibly** for the minor.

Transportation Consent and Authorization

I consent to and authorize my/our child to be transported to and from church sponsored activities in a church, rental, or private vehicle.

Photo Release Consent and Authorization

I understand that my child may be photographed and/or videotaped during his/her participation in events, activities, trips, excursions and programs conducted by MHC and consent to and authorize such photographs and/ or videos to be used by MHC for ministry related presentations, publications and/or websites. I understand that my child's name will not be used and/or published in any way, and that no compensation will be given for the use of such photographs and/ or videos.

MY SIGNATURE BELOW INDICATES THAT I HAVE READ THIS ENTIRE DOCUMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT IT AFFECTS MY LEGAL RIGHTS, AND AGREE TO BE BOUND BY ITS TERMS

Signature of Parent/Guardian

Date

Printed Name of Participant (Minor)

Printed Name of Parent/Guardian