

REGISTRATION PACKET 2022

COST:

\$150

GRADES:

Completed 3rd-5th Grade

CAMP LOCATION:

5039 Highway 77 South Davis, OK 73030 (580) 369-2101

CONNECT @ CAMP

FACEBOOK: FBC Wagoner Kidone Children's Ministry

06.03.22 - DEPARTURE

Departure: TBD

06.06.22 - RETURN

Estimated Return Time: TBD

WHO'S WHO?

CAMP LEADERSHIP & CONTACT INFORMATION:

Garrett Black

garrett@fbcwagoner.com

918-485-2428 Church 405-760-0198 Cell

Boys Sponsors

Garrett Black Jeremy Holmes **Girls Sponsors**

Missy Lasater Anna Holmes Audrey Hopkins Bethanee Smith

IMPORTANT INFO

Electronics @ Camp

Campers are asked to leave all electronic devices at home. In the event that campers bring electronic devices, these will be collected by their Small Group leader and returned by arrival on Friday. This includes mobile phones, gaming devices, iPods, iPads, Ataris, fax machines, etc. First, it's a safety and security issue. Second, it can be a big distraction. Third, these are typically expensive devices. We'd like to help you minimize the possibility of lost or damaged items. Campers have permission to call home using a leader cell phone at ANY time.

Money @ Camp

We ask that you do not send any money with your kids. Crosstimbers uses wristbands to purchase anything at camp, they operate on a cashless system. Wristbands are worth \$10 each, and they will receive one free wristband from the church. If you would like to purchase additional wristbands please see Garrett. A \$10 wristband will be enough cover snacks and drinks from the concessions stand, but if they would like to purchase additional items from the gift shop along with concessions they will need another wristband.

Tips for camp

Write your child's name in all your clothing
Pack each outfit in a gallon ziploc bag
Do not send money with your child
Send your child bunk mail (SEE BUNK MAIL @ CAMP FOR MORE INFO)

Medicine @ Camp

Please follow these instructions when sending over-the-counter and prescription medications to camp for your kids.

- 1. PRESCRIPTION MEDICATION should be put in a daily pill organizer and should be separated into the appropriate days. The organizer must be clearly labeled with your child's name, grade, and gender.
- 2. Bring any OVER-THE-COUNTER MEDICATIONS in their sealed container. Clearly label the outside of the container with your camper's name.
- 3. Bring an INDEX CARD with your child's name and a list of the medication[s] they need to take at camp along with administration instructions [i.e.: time of day, with food, etc.]. If applicable, put prescription instructions and over-the-counter instructions on opposite sides of the card.
- 4. Place any prescription medication, over-the-counter medication, and the applicable index card into ONE ZIPLOC BAG clearly labeled with your child's name.
- 5. Do not pack your ziploc bag. Instead, turn in ALL medications at check-in on the morning of departure. There will be a table specifically for medicine drop off at check-in.
- 6. Contact Garrett Black if you have any specific medication needs or questions prior to camp departure.

Please note: We will have Tylenol and Ibuprofen on hand, if needed. We are carrying a First Aid kit as well. Thanks for helping us keep kids and students safe while at camp!

Allergies @ Camp

Campers with food allergies at camp are encouraged to bring appropriate snacks along to camp. Based on the information you provided in your registration and completed waivers, we will be in touch with the camp cooks about your student's needed alternative food options. *Parents whose student needs an EpiPen at camp should provide that information on an index card turned in along with other medicines at registration. The card should contain the child's name and reason for the EpiPen. Specific details about carrying and administering the pen should be discussed with a member of the medic team prior to leaving for camp.

Emergencys @ Camp

If in case of an emergency, your child will be taken to the nearest hospital and you as a parent will be notified before we leave for the hospital to inform you on what happened.

The nearest Hospital is: Arbuckle Memorial Hospital 2011 W Broadway Ave Sulphur, OK, 73086 580-622-2161 The nearest Urgent Care is: iCare Centers Urgent Care 404 W Main St Davis, OK, 73030 580-247-9404

Bunkmail @ Camp

Instead of sending letters to kids at camp we have an email address set up for parents to email campers. All you need to do is put the campers first and last name along with the church they are attending camp with in the subject of the email and send it to ctgl@oklahomabaptists.org. Every child wants to get an encouraging letter from a relative. The campers get excited and a glow comes off of their face when they receive Bunkmail. This is a great way for you as parents to encourage your kids when they are coming to camp.

Send your bunkmail to CROSSTIMBERS@oklahomabaptists.org Subject: FBC Wagoner Type your childs name at the top of the email.

FOLLOW THE EXAMPLE BELOW

BUNK MAIL:

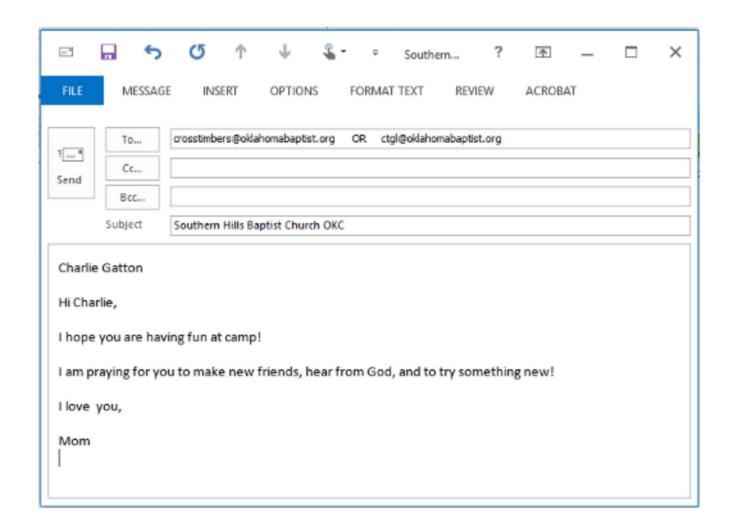
1. CROSSTIMBERS EMAIL ADDRESS:

DAVIS: CROSSTIMBERS@OKLAHOMABAPTISTS.ORG
GRAND LAKE: CTGL@OKLAHOMABAPTISTS.ORG

2. IN THE SUBJECT LINE, PUT WHAT CHURCH YOU ARE WITH.
PLEASE WRITE THE CITY AND THE CHURCH.

3. PUT THE CAMPERS FULL NAME AT THE TOP OF THE EMAIL.





PACKING INFORMATION

WHAT TO PACK

CLOTHING

SHORTS (REMEMBER MODESTY)

SWIMSUIT (ONE-PIECE FOR GIRLS) T-SHIRTS

UNDERWEAR & SOCKS

PAJAMAS

TENNIS SHOES

WATER SHOES

SANDALS (FOR CABIN & POOL ONLY)

WHITE SHIRT (FOR SOCK WARS)

CABIN EQUIPMENT

BEDDING & PILLOW

BATH TOWELS & WASHCLOTHES

PERSONAL ITEMS

SOAP

TOOTHBRUSH

SHAMPOO

BRUSH

CHAPSTICK SPF-45 SUNSCREEN SPF-45

BAG FOR DIRTY CLOTHES BIBLE

INSECT REPELLENT WITH DEET

OPTIONAL

BOOK OR JOURNAL

FLASHLIGHT OR HEADLAMP

SUNGLASSES

RAIN JACKET

BASEBALL CAP OR HAT

WHAT NOT TO PACK

VIDEO GAMES FOOD

WEAPONS A GOLDFISH

FIREWORKS SHAVING CREAM (UNLESS YOU HAVE A BEARD)

TOYS CELL PHONES SLINGSHOTS LIGHTSABERS

FOR PARENTS

Three Strikes Rule

We want everyone to have the best week possible. If we are having trouble with any student's behavior, they have three chances. Their 1st strike is a warning. On the 2nd strike, parents will receive a phone call explaining the situation. On the 3rd strike, parents must come pick up their child from camp. We obviously don't expect this to be an issue for anyone! However, we want to make sure every person comes to camp knowing what is expected of them.

*Behaviors that will not be tolerated:

- 1) Physical Altercation
- 2) Disrespect
- 3) Inappropriate Language
- 4) Bullying/Hazing of any kind
- 5) Choosing not to follow Camp Rules

Sending Your Student

We believe Crosstimbers can have a deep impact on your child's life in the friendships they create and taking next steps in their faith journey. Knowing the impact Crosstimbers can have on your child, we believe you can help set up their camp experience and continue the conversation when they get back. Here are a few helpful tips to guide you:

SENDING

PRAY. This seems obvious, but this is perhaps the best absolute way to prepare your child for their camp experience. Pray for: travel, adult leaders, deep friendships, Bible study time, deep relational connections during recreation, our worship experience, deeper understanding of God. Gather your family together the morning we leave or the evening before to pray together.

TALK IT UP. We want our families to be just as excited about this experience as students are. Talk about all the fun and growth students are sure to experience before your child leaves. There is a level of anticipation, waiting to see what all God is going to do, that should have us excited for our students. Talking it up also helps to relieve any pre-camp stress or anxiety.

ENCOURAGE. One neat idea is to take the time to write your child a letter and slip it into their bag before we load the luggage. An encouraging phone call during the week will also mean so much to your child.

FOR PARENTS CONT.

Receiving Your Student

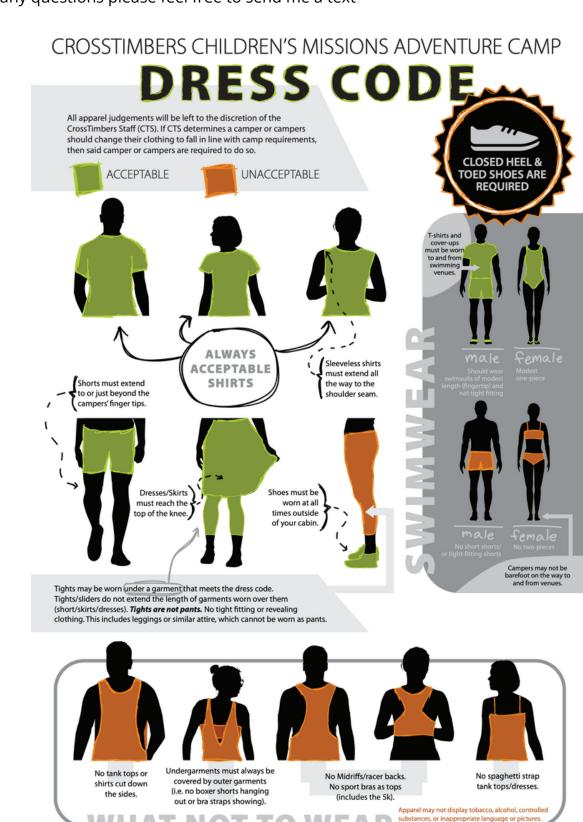
RECEIVING

CONTINUE THE CONVERSATION. After camp, the easy thing to do is move on to your other summer activities without revisiting the things they learned at camp. This is understandable because you weren't there to experience it with them, but this is a great opportunity to ask questions about their experience and how you can help them continue spiritual growth throughout the year. By the way, it's totally normal for some kids to immediately regurgitate every detail, but others may need a day to process and decompress before they talk with you.

NEXT STEPS. Something that may come from your child's camp experience are ideas about how your family can then take next steps of faith together. Use their experience to be a catalyst for your entire family.

DRESS CODE

We ask that students and adults dress modestly. This info sheet is provided by Falls Creek/Crosstimbers and helps show the appropriate attire your child needs to pack/wear. If you have any questions please feel free to send me a text



STUDENT CHECK-IN

Arrival Time

Arrival time will be determined once Crosstimbers releases more info about arrival and departure times.

Upon Arrival

Once you arrive, you will be greeted out in the parking lot and assisted with loading your luggage by some of our team leaders. From there, you will follow the signage into the MAC (FBC Gym) where you will be guided with forms, medications, and further assignments. We invite all parents to stick around for a brief orientation and group prayer before our midnight departure.

WHAT ARE WE EATING?

CAMP MENU

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LUNCH

DINNER

DAY 1

NO BREAKFAST

HAMBURGERS & CHIPS BAKED BEANS, LETTUCE, TOMATO, ONION, CHEESE, SALAD BAR, **DESSERT & DRINKS**

CHICKEN STRIPS, MAC & CHEESE, CORN, SALAD BAR. **DESSERT, & DRINKS**

BISCUITS & GRAVY, DAY 2 SAUSAGE, COLD CEREAL, MILK, & JUICE

PIZZA, SALAD BAR, FRUIT COCKTAIL, **DESERT, & DRINKS**

CHICKEN FRIED STEAK. MASHED POTATOES, GREEN BEANS, ROLLS, SALAD BAR, **DESSERT, & DRINKS**

DAY 3

PANCKAKES OR WAFFLES. EGGS, COLD CEREAL, MILK, & JUICE

CORN DOGS, CHILI, FRITOS, PEARS, SALAD BAR, DESERT, & DRINKS SOFT TACOS, RICE, CHIPS & SALSA, SALAD BAR, **DESSERT, & DRINKS**

DAY 4

PANCAKE SAUSAGE STICK, EGGS, COLD CEREAL, MILK, & JUICE

SANDWICHES (TURKEY OR HAM), CHEESE, CHIPS, **DESSERT, & DRINKS**

NO DINNER NOTIFY CT OFFICE FOR "TO GO" LUNCHES

Please tear off the last 2 pages and return to the church office with your check or cash of \$150. Partial payment will be accepted. Full payment must be made by May 15th.

CrossTimbers 2022 Camper Release & Waiver of Claims Form

Date of Birth:/	der: Male / Female circle one Grade Co	ompleted: 3, 4, 5, 6 Circle one
Shirt Size: YS, YM, YL, AS, AM, AL, A	XL, 2XL, 3XL, 4XL, 5XL Circle	e one
Address:	Phone: ()
City:	State:	Zip:
In Emergency Notify:		
Home Phone: ()	Cell or Work Phone: ()
Secondary Emergency Contact:	Phone: (_)
Does camper have ANY known allergies? (i.e. food, medication, etc.) YES /	NO Circle one Please specify	
Does camper presently take any medications regularly? YES / NO.	O Circle one (use the back of this form if necessor	ary)
If yes, what medications?	For what reason?	
2. Please List any other medical condition(s) that would be helpful to	know:	
Date of last tetanus immunization:		
4. The above named individual has current medical insurance covera	ge through:	
Insurance Company:	Name on Insurance Policy:	
Insurance Company Phone Number:	Policy Number:	
Mailing Address for Medical Claims (see back of insurance card):		
City:	State:Zip: _	
6. Will parent or guardian of the Camper attend camp during the same If yes, name of parent/guardian I understand that it is the responsibility of my ch or to limit my child's recreational activities beca	ild's Host Church to obtain insurar	nce permission for treatment
My child will be attending Cross Timbers during the summer session, 202 Convention of Oklahoma ("OKLAHOMA BAPTISTS"). In the event that m BAPTISTS or any of their agents or employees is hereby authorized to co surgical care or hospitalization, to my child as is recommended or suggestions.	2. CrossTimbers Children's Missions Adventure Cam by child should need emergency medical care or att consent to the provision of such emergency medical	p is managed and operated by the Baptist General tention, the Host Church leadership, the OKLAHOMA care, including without limitation, medical, dental,
If such emergency care is provided, I understand that my health insurance shall be my responsibility. I understand that the Host Church or the OKLA expenses incurred.	-	
There are instances when third party contractors are used to operate and neither the Host Church nor the OKLAHOMA BAPTISTS is responsible for the is liable for the actions or activities of participants or sponsors participating	e action of these third party contractors. I further agre	ee that neither the Host Church nor the OKLAHOMA BAPTISTS
I understand that the risk of injury from any recreational activity is significated equipment, and personal discipline may reduce this risk, the risk of serious negligence, and assume full responsibility for my child's participation in or	injury does exist. I knowingly and freely assume all ri	
Furthermore, in consideration of my child being allowed to attend CrossTin harmless the Host Church, the OKLAHOMA BAPTISTS, their agents or empl Church, the OKLAHOMA BAPTISTS, or their agents or employees as a result observation of recreational activities at CrossTimbers, and (2) injuries arisin employees to consent to the provision of emergency medical care to my children and the provision of emergency medical care to my children are to my children and the provision of emergency medical care to my children are to my children and the provision of emergency medical care to my children are the provision of emergency medical	oyees, against any and all causes of action, rights, clai c of injury to my child, including, but not limited to: (1 ng from the decision of the leadership of the Host Chu	ims or suits which I or my child may have against the Host) injuries arising from my child's participation in or
I understand that my child's image may be included in a video or in phot resources, camp endorsed web sites, etc.	ographs that may be made during camp. I consent	that my child's image may appear on videos, promotional
I give authority and permission to the Host Church, the OKLAHOMA BAPTIS	STS, and any of their staff or agents to inspect my chil	d's belongings while at CrossTimbers.
I understand that CrossTimbers is a place where many students seek couns and emotional counsel during their week of camp.	sel and advice from adult leaders, staff, counselors, a	nd others. I hereby consent to my child receiving spiritual
Parent Signature:	Relationship to child:	Date:

Church Name:	
Campers Last Name:	First Name:
Age: Grade:	
	Name of Medication:
Medication Authorization	Reason for Medication:
	Dosage & Time to administer:
Please send only medications that are absolutely necessary. Medications must be in the original	Side effects to report to parents:
container, in a zip-lock bag, accompanied by this form.	Side effects that require immediate medical attention:
I, the parent/legal guardian of the camper	
named on this form give my permission for the church sponsors to:	Name of Medication:
the charm sponsors to:	Reason for Medication:
Dispense Acetaminophen (Tylenol) or Ibuprofen (Advil) to camper for headache, fever or minor pain;	Dosage & Time to administer:
 Dispense Benadryl or generic equivalent to camper for allergic reactions; Dispense Tums, Kaopectate or Pepto 	Side effects to report to parents:
Bismol for upset stomach; Dispense antibiotic ointment (such as Hydrocortisone Cream) for minor injuries;	Side effects that require immediate medical attention:
Dispense prescription or other over-the-	
counter medication designated by and produced by the parent/guardian or	Name of Medication:
family physician.	Reason for Medication:
I understand that church staff, camp nurse, or church sponsors shall not be liable to the	Dosage & Time to administer:
student, parent, or guardian of the child for civil damages for any personal injuries to the student, which result from acts or omissions in administering any medication while at camp.	Side effects to report to parents:
	Side effects that require immediate medical attention:
Today's Date:	
Signature of Parent or Legal Guardian:	
Printed Name of Parent or Legal Guardian:	
Emergency Day phone / Night Phone:	/