

## CAMPS AT EPWORTH BY THE SEA

All Mid High Mania and Elementary Camps are filled with a weeks worth of fun activities and opportunities to grow closer to Christ through daily worship, Bible study, and fellowship. Campers will enjoy the beach, pool, boat rides, crafts, games galore, hilarious morning shows, and evenings of worship. Bring your friends and enjoy this week of Fun in the Son! **COUNSELORS ARE PROVIDED.**

### ELEMENTARY 1 June 22-26, 2009

Entering 4th-6th grades  
Cost: \$225

**Deadline: June 12**

### ELEMENTARY 2 July 6-10, 2009

Entering 4th-6th grades  
Cost: \$225

**Deadline: June 26**

### ELEMENTARY 3 July 13-17, 2009

Entering 4th-6th grades  
Cost: \$225

**Deadline: July 3**

## ROAD RULES

The South Georgia Conference Summer Leadership Team is available to come to your church to lead a youth week, children's events, or whatever your need may be. They will be available in small groups or large for the week of July 19 - July 24, 2009. Call Adam Ricker at the Connectional Ministries Office, **888-266-7642**, to reserve your team.



Non-Profit Org.  
U.S. Postage  
**PAID**  
Permit No. 216  
St. Simons Island, GA 31522

Connectional Ministries  
South Georgia Conference  
The United Methodist Church  
P.O. Box 20408  
St. Simons Island, GA 31522

RETURN SERVICE REQUESTED



## SUMMER CAMPS FOR YOUTH AND CHILDREN

SPONSORED BY  
THE SOUTH GEORGIA  
CONFERENCE



AT EPWORTH BY THE SEA  
ST. SIMONS ISLAND, GA

# LIVE READY



Are you ready to discover what it means to **Live Ready?** With the help of our camp coach we will learn the secrets of living a victorious life. Join the team and together we will discover the importance of how to

**Live Ready To Win, Live Ready To Choose, Live Ready To Share, and Live Ready To Fight.**

*Honor Christ and let him be the Lord of your life. Always be ready to give an answer when someone asks you about your hope. 1 Peter 3:15 (CEV)*

### MID-HIGH MANIA 1 June 8-12, 2009

Entering 6th-9th grades  
Cost: \$225

**Deadline: May 29**

### MID-HIGH MANIA 2 June 15-19, 2009

Entering 6th-9th grades  
Cost: \$225

**Deadline: June 5**



#### **SUMMER WAVES FOR MID-HIGH MANIA:**

Enjoy the fun and excitement of our Mid-High Mania Summer Camp with a trip to Summer Waves Water Park. Located on Jekyll Island, a short 15-minute bus ride from St. Simons Island, this family friendly water park has been in operation for more than 15 years. Campers will be transported to and from the park on school buses and will be accompanied at all times by their camp counselors. Female campers are required to wear a one piece bathing suit during all water related activities. This excursion is included in the cost of the camp. Please call Adam Ricker, Camp Director, at (888) 266-7642 for questions or to make other arrangements for your child on the day that we visit the water park.



# ONLINE REGISTRATION AVAILABLE!

Online registration is available by logging onto [www.SGAJMC.org](http://www.SGAJMC.org). Credit card payments will be accepted. You may also download and print a registration form, if preferred, and mail to:

**Name of Camp** (please specify)  
P.O. Box 20408  
St. Simons Island, GA 31522

All checks should be made out to Connectional Ministries. For questions, please contact Diane Giles, Camp Registrar, or Adam Ricker, Camp Director, at **888.266.7642**



**COMING FALL OF '09**

**KIDZQUEST '09**

**September 25-27**  
**October 2-4**

Epworth By The Sea  
For children in 3rd-6th grades

**NOVEMBER CELEBRATION '09**

**November 20-22**

Epworth By The Sea  
For students in 6th-12th grades



## CAMP STAFF

The Camping Staff is comprised of the following:

Camp Director: **Adam Ricker**  
Camp Registrar: **Diane Giles**  
Head Counselors:  
**Jack Caldwell and Lauren Caldwell**

Camp Counselors: a group of 15 college students completely committed to serving Christ through working with youth and children throughout the summer. Each staff member has passed a background check as well as a sexual offenders background check. All counselors were interviewed and hired by the Camp Ministry Team, which includes the Director, the Head Counselors, and 3 other persons previously involved in the camping ministry.

### Please mark camp desired:

CAMP	COST	DATES	DEADLINE
___ <b>Mid High Mania 1</b>	\$225	June 8-12, 2009	May 29
___ <b>Mid High Mania 2</b>	\$225	June 15-19, 2009	June 5
___ <b>Elementary 1</b>	\$225	June 22-26, 2009	June 12
___ <b>Elementary 2</b>	\$225	July 6-10, 2009	June 26
___ <b>Elementary 3</b>	\$225	July 13-17, 2009	July 3

Fill out completely and mail to: (Name of Event), P.O. Box 20408, St. Simons Island, GA 31522. Applications are accepted on a first-come, first-served basis. Space is limited so register right away. Make checks payable to Connectional Ministries. You must turn in a legible copy of camper's health insurance card with current policy and group numbers along with health form, or camper will not be accepted.

### T-shirt Size (adult sizes only):

Small  Medium  Large  X-Large  2X-Large  3X-Large

Full Name \_\_\_\_\_

Preferred Name for Name Tag \_\_\_\_\_

Age \_\_\_\_\_ Gender \_\_\_\_\_ Birth date \_\_\_\_\_ Grade in Aug. 2009 \_\_\_\_\_

Social Security Number \_\_\_\_\_

Home Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Mobile Phone/Pager \_\_\_\_\_

Father's Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Mobile Phone/Pager \_\_\_\_\_

Emergency Contact Person \_\_\_\_\_

Phone Number \_\_\_\_\_

Local Church \_\_\_\_\_

District \_\_\_\_\_

Choice of cabin mate (ONLY ONE). Cabin mate must request you. \_\_\_\_\_

### Health Form:

Please check any of the following that apply to the applicant:

Allergies  Seizures  Asthma  Diabetes  Hypoglycemia

Other: \_\_\_\_\_

List any allergies (i.e. poison ivy/oak, bee stings, medication):  
\_\_\_\_\_

Do you have any special dietary requirements?  Yes  No If so, describe:  
\_\_\_\_\_

Are you currently taking any medication?  Yes  No If so, describe:  
\_\_\_\_\_

Are you currently under a physician's care?  Yes  No If so, describe:  
\_\_\_\_\_

Are there any other medical or special needs that might occur while you are at camp?  
 Yes  No If so, describe: \_\_\_\_\_

Date of last Tetanus shot \_\_\_\_\_

Do you carry family medical insurance?  Yes  No

**(Please enclose a copy of both sides of applicant's insurance card and complete the information below)**

Mother's Insurance Co. \_\_\_\_\_

Policy/Group # \_\_\_\_\_

Father's Insurance Co. \_\_\_\_\_

Policy/Group # \_\_\_\_\_

Other insurance (name) \_\_\_\_\_

Policy/Group # \_\_\_\_\_

A medical doctor's statement may be needed for special situations. I give my permission for the Connectional Ministries office to seek and provide care for this applicant in case any need arises, including natural disasters.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Photos will be taken during camp that may be used for future camp promotions.

### Honor Code

As a good steward of what God has entrusted to me and to preserve my witness, I agree to protect, care for, and be responsible for the property of the place at which I stay/meet. I also agree to abide by any and all rules placed on me by these entities. Administration reserves the right to send any person or group home who jeopardizes the purpose of the event for others by their misconduct. As a representative of Christ and His Church, we take seriously our responsibility to one another and our concern for the well-being of the total community.

Camper's signature \_\_\_\_\_

Date \_\_\_\_\_

**PLEASE NOTE: Both the registration and health forms must be returned to guarantee registration and admittance for camp.**