

Church the Brethren
Idaho District Presents

CAMP STOVER 2009

New Meadows, Idaho
Date: July 12th – July 18th



“Break Through with Jesus”

Camp Stover is an inter-generational camp, that is to say, all ages are in camp at the same time. Some activities are inclusive of the whole camp, such as morning meditations, campfires, meals, church service, and recreational activities. Other activities are by age groups.

Preschool* - Ages 3 – 5

Primary* - Finished Kindergarten – 3rd grade

Juniors – Finished 4th – 6th grades

Junior High – 7th and 8th grades

Youth – 9th – 12th grades

Young Adult – Second Summer after Graduation and Up

Adults*

Fees:

Preschool and Primary	Pre-Registration	\$ 52.00
	Postmarked after June 10 th	\$ 72.00
Juniors	Pre-Registration	\$110.00
	Postmarked after June 10 th	\$130.00
Junior High through Adult	Pre-Registration	\$125.00
	Postmarked after June 10 th	\$145.00

Cancellation 4 weeks or more prior to Camp = 100% refund. Cancellation 2 weeks prior to Camp = \$50% refund. Cancellation less than 2 weeks = No refund. For break down of daily or partial week fees, contact Gary Ackerman.

NOTE: Pre-registration includes a **FREE Camp Stover T-Shirt**. (Additional t-shirts will not be available at camp for purchase)

NOTE: Registration Fee includes **1 Admission to Zims Hot Springs** per Registered Camper.

Please send completed form (one per camper) to:

Gary Ackerman
44 N. Pit Ln.
Nampa, ID 83687

Juniors, Jr. High, Youth, and Young Adults stay in Camp Cabins.

*For Non-age group housing, please contact Gary Ackerman at (208) 467-2014.

Contact your local Church of the Brethren for Camper Scholarships for Grades 4th – 12th.

NOTE: Everyone attending Camp Stover **MUST** register immediately upon arrival at Camp. This is required to activate insurance.

Dear Campers, Parents, and Guardians:

Thank you for considering Camp Stover in your summer plans this year.

If you are new to Camp Stover, we have included a little more information in this letter for you, so please continue to read on. If you are familiar with how Camp Stover works, please feel free to skip down to the "Registration" portion of this letter and then continue on. There are some important items for you to know.

A little about Camp Stover... Camp Stover is a Church Camp, owned and operated by members of the Church of the Brethren in the District of Idaho. For more on the Church of the Brethren you may check the following web sites: www.mtndove.org, www.nampacob.org or www.idcob.org. Camp Stover is located right outside of New Meadows, Idaho.

Camp week at Camp Stover...July 12th – July 18th 2009 Camp Stover is an inter-generational Church Camp, with all ages coming together for one (1) week of camping. Some activities are inclusive of the entire camp, such as meals and the evening campfire and some activities are done by age groups.

Adults stay in reserved rooms, cabins, personal tents, trailers, or RV's; and children who have not completed the 4th grade this year must spend their nights with and be accompanied and supervised by their parent, guardian, or another pre-consulted adult. **To reserve a spot for your tent, trailer, or RV, or to reserve a room or cabin, call Gary Ackerman at (208) 467-2014.**

Kids who have completed the 4th grade thru the summer of their 12th grade year stay in our "age group" cabins; as follows: Those who have completed 4th – 6th grades stay in our "Junior" cabins, those who have completed 7th – 8th grades stay in our "Jr. High" cabins, and those who have completed 9th – 12th grades stay in our "Youth" cabins. Each of these age groups consists of a boy's cabin, girl's cabin, a resource leader, counselor(s) for boys, and counselor(s) for girls. Age groups will go out of camp at least two (2) times during camp week, once to go to Zims Hot Springs to swim, and once on an all day hike.

Registration... Pre-registration must be post-marked this year by June 12th. The Pre-registration includes a free Camp T-shirt. See page 1, which includes pricing and remittance address.

If you are registering a child, please make sure you have the following:

- Completed and signed registration form, (Page 3 of this packet).
- Kid's who have complete the 4th – 12th grade also need a completed and signed information and consent form (pages 4 – 7). Note the different areas that need to be initialed on page 6 and signed on page 7.

All Campers must register.

Dress Code... Please note the dress code on page 7 of this packet.

During Camp Week... Camp officially starts with the evening meal on Sunday, July 12th, however the counselors will be ready to greet the age group campers and help them settle in at 4:00 p.m. Age group campers will be with their age groups at all times and must check with their counselor(s) or resource leader before leaving the area.

If you need to contact your camper at Camp, you may leave a message at (208) 347-2276.

Thank you for your interest in Camp Stover. We look forward to seeing you and your child(ren) at Camp.

May God Bless You,

The Camp Stover Program Committee

Keith & Linda Goering
(208) 495-2737

Debbie Peterson
(208) 459-2184

Tanya Bethel
(208) 362-6037

CAMP STOVER CHURCH OF THE BRETHREN
INFORMATION AND CONSENT FORM
(Required for each child that has finished 4th through 12th grade)

Child's Name _____
Last First Middle

Home Address _____
Street City State

Phone Number (_____) _____ Date of Birth _____ Age _____

Grade Finished in 2009 _____

Father's Name _____

Address _____

Employer _____

Home Phone _____ Work Phone _____

Mother's Name _____

Address _____

Employer _____

Home Phone _____ Work Phone _____

Emergency Contacts (in event that a parent cannot be reached):

1. _____
Name Address Phone

2. _____
Name Address Phone

Name of Family Physician _____ Phone _____

Family Medical/Hospital Insurance Carrier _____

Group or Policy Number _____

Health History Record

Part I: Illness and injuries (check all that apply)

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Ear Infection | <input type="checkbox"/> Bleeding/Clotting Disorders | <input type="checkbox"/> Hypertension |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Heart Defect/Disease | <input type="checkbox"/> Seizures |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Musculoskeletal Disorders | |
| <input type="checkbox"/> Other (please specify) _____ | | |

Part II: Allergies (check all that apply and specify nature of allergic reaction)

- | | |
|--|-------|
| <input type="checkbox"/> Animals | _____ |
| <input type="checkbox"/> Hay Fever | _____ |
| <input type="checkbox"/> Pollen | _____ |
| <input type="checkbox"/> Food | _____ |
| <input type="checkbox"/> Medicines/Drugs | _____ |
| <input type="checkbox"/> Insect Stings | _____ |
| <input type="checkbox"/> Plants | _____ |
| <input type="checkbox"/> Other | _____ |

Part III: Other Health Conditions (check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Bed Wetting | <input type="checkbox"/> Sleep Disturbances | <input type="checkbox"/> Motion Sickness |
| <input type="checkbox"/> Constipation | <input type="checkbox"/> Emotional Disturbances | <input type="checkbox"/> Menstrual Cramps |
| <input type="checkbox"/> Nose Bleeds | <input type="checkbox"/> Hearing Impairment | <input type="checkbox"/> Fainting |
| <input type="checkbox"/> Special Diet | <input type="checkbox"/> Sickle Cell Trait Disease | <input type="checkbox"/> Wear Contact Lenses |
| <input type="checkbox"/> Other (specify) _____ | | |

Please explain any items that are checked. Indicate any information that the adult in charge of your child may need to know concerning any of these health conditions. Also, indicate any activity to be encouraged or restricted.

Part IV: Immunizations

Are your child's immunizations current? Yes No

If no, please indicate which ones are not current _____

Please list all medication your child is currently taking, the prescribed dosage and normal time it is taken each day.

(Add an additional sheet if needed or use the back of this form)

<u>Medication</u>	<u>Dosage</u>	<u>Time</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

For Jr. High and Youth Campers please initial one of the following:

- _____ My child can administer their own medication.
- _____ An adult should have and administer my child's medication.

Note: Juniors will have their medication kept & administered by an adult.

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Please initial any of the following over the counter medications you would want our medical coordinator to provide to your child for aches, pains, bug bites, etc.

- _____ Advil or Motrin (ibuprofen) – for aches, pains, and minor sprains
 - _____ Tylenol – for headaches or minor pains
 - _____ Pepto-Bismol – for upset stomach
 - _____ Benadryl (antihistamine) – for insect bites
 - _____ Calamine Lotion, Benadryl Cream, etc. – for itching
 - _____ Cough Drops – for cough or dry throat
 - _____ Sucrets – for sore throat
 - _____ Visine – for minor eye irritation
 - _____ Imodium A-D - for diarrhea
- Note: Generics of the above over the counter medications may be used to keep costs down.**

Additional concerns or instructions: _____

Activity Permission and Authorization for Consent to Treatment of Minors

To the best of my knowledge, the information provided on this form is accurate and complete. My child, named above, has my permission to attend Camp Stover/Church of the Brethren, and to go on short hikes and trips away from Camp, and I have made note of any special circumstances and/or restrictions in the space provided on page 5.

My child may be released to the emergency contact person in the event that I cannot be reached.

_____ Yes _____ No

While attending or traveling to and from Camp Stover or special activities, I hereby authorize the adult accompanying or assisting my child to consent to any X-Ray examination, any anesthetic, medical, or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or specific supervision of any physician and/or surgeon, or to any X-Ray examination, anesthetic, dental, or surgical diagnosis or treatment and hospital care to be rendered to said minor by a dentist licensed under the provision of the dental practice act.

Please sign one of the following:

- This authorization is given for the protection and preservation of my child and Camp Stover/Church of the Brethren, under and pursuant to the laws of the State of Idaho governing such cases.

Date _____ Signature _____

- I do not desire to sign this authorization and understand this information will be in the leader's possession.

Date _____ Signature _____

Philippians 4:5 "Let your moderation be known to all men..."

Camp Stover is thankful for the cooperation of parents and campers who work together to maintain dress standards. Swimsuits are to be worn only when at the pond, or when going to or from Zims. String bikinis are not allowed. Not permitted are: revealing or risqué outfits or clothing that has holes purely for fashion or shirts worn to show off your stomach. Such dress will not be allowed. We are an inter-generational camp...if it might make someone uncomfortable to see it, then you will be asked to change.

All campers at Camp Stover are expected to conduct themselves in a Christ-like manner. The leadership of Camp Stover recognizes that campers are learning and growing to be responsible. The Camp reserves the right to dismiss any camper that is disruptive, disrespectful or cannot follow camp rules. Parents/Guardians will be notified and the child will be sent home.

CAMP STOVER

BE PREPARED

SUGGESTED NEEDS FOR CAMP

(This list was primarily designed for age group campers, those who have finished 4th through 12th grade)

Please mark everything with your name and pack in old luggage. New equipment and clothing is not necessary. Bring everything you need. None of these items are available at camp.

Label everything.

Item	To Camp	Home
Warm sleeping bag, extra blanket		
Poncho or Rain Gear		
Very warm jacket or coat		
2 or more pair serviceable shoes		
Old tennis shoes (for creek fun)		
Rubber Flip Flops		
2 or more pairs of pants (jeans)		
3 or more pairs of shorts/cut-offs		
7 or more blouses, t-shirts		
Long sleeve shirt, sweatshirt, or sweater		
Changes of underclothing		
Plenty of socks		
Warm Pajamas		
Study Bible		
Laundry bag		
Hair tie for long hair		
Chap stick		
Insect Repellent		
Suntan lotion or sunscreen		
Stationery & Stamped envelopes		
Notebook & Pencils		
Swimsuit & Towel		
Comb, Brush, Toothpaste, Shampoo		
Towel, Wash Cloth, Soap		
Drinking Glass		
Kleenex		
Recommended but not required	NO NO's at Camp Stover	
Day pack / knapsack / backpack	Fireworks of any kind	
Canteen or water bottle	Tobacco or alcohol products	
Pillow		
Musical Instruments (suitable for Camp)		
Portable audio or electronic devices allowed with counselor's permission only		