



CAMP WAKONDA

~ 2017 ~

*An outdoor
Christian Education Ministry
amid the great oaks in the
beautiful Wisconsin countryside*

Telephone: 608-868-6025
Church: 608-868-2741

Hearing God's Voice Entering Grades 4 – 6 July 16 – 21 Sunday – Friday

Director: Jen Dutcher

Time: 1:00 p.m. Sunday – 9:00 a.m. Friday

Check-in: 1:00- 2:00 p.m. Sunday, July 16

Cost:

First Time campers \$70
Returning campers before June 23rd \$140
Returning campers after June 23rd \$170
No registrations after noon on July 12th

Grow! Entering Grades 10 – 12 July 2 – 9

Director: Chad Ochs

Time: 4:00 p.m. Sun. – 10:00 a.m. Sunday

Check-in: 4:00-5:00 p.m. Sunday, July 2

Cost:

First Time campers \$70
Returning campers before June 23rd \$165
Returning campers after June 23rd \$195
No registrations after noon on June 28th

Jesus Where I Live Entering Grades 7 – 9 July 9 – July 16

Directors: Mark & Linda Bentz

Time: 4:00 p.m. Sun. – 9:00 a.m. Sunday

Check-in: 4:00-5:00 p.m. Sunday, July 9

Cost:

First Time campers \$70
Returning campers before June 23rd \$165
Returning campers after June 23rd \$195
No registrations after noon on July 5th

***The cost for first-time campers is \$70.**

You are a first-time camper if you have never attended an overnight camp session at Camp Wakonda before.



First come, first serve! Register Early! Don't miss camp! Registration will be closed once camp is full.

Early Registration Discount of \$30 applies only if all paperwork and fees are received by June 23rd.

If you have any scheduling uncertainties, we do have a very flexible refund policy.

Complete registrations **must be** received by each camp's deadline. **Due to insurance laws, all paperwork and fees must be turned in before a camper will be allowed to check-in at camp.**

Contact the Camp Registrar at the church office (608-868-2741) with any questions.

You may print all forms from our website: www.miltonsdb.org

Mail all forms and fees early enough to arrive by your camp's deadline to:

Milton SDB Church, 720 E. Madison Ave., Milton WI 53563



Camp Wakonda's Statement of Purpose

Camp Wakonda is a time of fun, friendship, and growth. The week you spend at camp will be full of activities, people, and experiences.

More than just a fun time,
Camp Wakonda is a setting for spiritual renewal. As a ministry of the Milton Seventh Day Baptist Church, the goal of camp is to connect you to God, friends, and mentors in the beautiful setting of His creation.

Our Camp Program Includes:

- Bible-centered teaching with an inter-denominational emphasis
- One-to-one mentoring with campers
- Establishing good habits of Christian living
- Providing practical experience on leadership and service
- Creative use of time incorporating a variety of recreational activities that foster spiritual growth
- Developing the ability to relate positively to others; to face and work out life's problems
- Faith, friends, food and fun!

**KEEP THIS PAGE FOR
YOUR INFORMATION!**

Highlights of Camp:

- ✓ Recreational & evening games
- ✓ Campfire activities
- ✓ Water activities
- ✓ Team-building events
- ✓ Praise and Worship time
- ✓ Bible study
- ✓ Small group time
- ✓ Basketball court
- ✓ Sand volleyball
- ✓ Wooded area for hiking
- ✓ Small creek for fishing

What to Bring:

- ❑ Sleeping bag or bedding for twin bed, pillow
- ❑ Soap, shampoo, deodorant
- ❑ Toothbrush & paste
- ❑ Towels and washcloths
- ❑ Long pants/Long sleeved shirts
- ❑ Clothes for church
- ❑ Nicer clothes for Friday night banquet
- ❑ Sneakers, walking shoes
- ❑ Modest swim suit, beach towel, sunscreen
- ❑ Rain wear
- ❑ Flashlight
- ❑ Insect repellent (lotion)
- ❑ Notebook, pencils, pen
- ❑ Bible
- ❑ \$5-10 for canteen snacks
- ❑ Do NOT bring food, tobacco, intoxicants, illegal drugs; fireworks /matches/ lighters; weapons of any kind: guns/knives; aerosol insect repellent; pets.
- ❑ Electronic devices (games/cell phones/ music players of any kind) must be turned in at the beginning of camp. Extremely limited use of cell phones may be allowed by camp directors in emergencies.

HOW TO GET THERE



Camp Wakonda is located about 4 miles north of Milton at the corner of Klug Road and County N.

Take Exit 11 off of the Hwy. 26 by-pass, go east on County Road N and turn right onto Klug Road.

The entrance to Camp Wakonda will be on your left.

2017 Camp Wakonda Registration Form

Received _____
Paid _____
Registrar _____
Medical _____

***Please Print**

Camper Name: _____

Male **Female** **Birth Date:** ___/___/___ **Grade entering in the Fall:** _____

Home Church: _____ **City:** _____

Parent/Guardian Name(s) _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Parent /Guardian Phone #s: (1) _____ (2) _____

(3) _____ (4) _____

Parent/Guardian E-mail(s): _____

Your registration fee includes a T-Shirt – please specify the size you want.

Size: Adult: S M L XL XXL Child: S M L XL

**Registrations will be processed in the order they are received.
 Once each camp reaches capacity, no additional registrations will be processed.
 No registrations will be accepted after noon on the deadline dates listed below.
Please circle the amount to be paid.**

<u> </u> Hearing God's Voice (entering Grades 4-6)	July 16-21	Registration Deadline: July 12th
<i>First Time campers*</i>		\$70
<i>Returning campers who turn in all forms and payment before June 23rd</i>		\$140
<i>Returning campers who register after June 23rd</i>		\$170

<u> </u> Jesus Where I Live (entering Grades 7-9)	July 9-16	Registration Deadline: July 5th
<i>First Time campers*</i>		\$70
<i>Returning campers who turn in all forms and payment before June 23rd</i>		\$165
<i>Returning campers who register after June 23rd</i>		\$195

<u> </u> Grow! (entering Grades 10-12)	July 2-9	Registration Deadline: June 28th
<i>First Time campers*</i>		\$70
<i>Returning campers who turn in all forms and payment before June 23rd</i>		\$165
<i>Returning campers who register after June 23rd</i>		\$195

**You are a first-time camper if you have never attended an overnight camp session at Camp Wakonda before.*

NOTE: If fee will cause a hardship, please contact the church office to discuss alternatives.

Make checks payable to Milton SDB Church. Camp fee should accompany registration forms.

Office Use:	Amount Due: _____	Amount Paid: _____	Scholarship: _____
Other Notes: _____			

CAMP WAKONDA RULES OF CONDUCT

The purpose of camp is to provide spiritual enrichment and fellowship opportunities for children entering 4th through 12th grade. The objective of these guidelines on conduct is to provide policy and direction of appropriate conduct while at Camp Wakonda. These guidelines are based on Biblical principles and Christ-like behavior. It is hoped that these guidelines will assist in providing an environment where spiritual enrichment and fellowship can take place.

1. Youth will be under the supervision of adult staff. It is expected that the youth will be cooperative and follow the instructions, schedule and requests of the camp staff. Disregard of Camp rules or policies may constitute grounds for camper dismissal. Camper will be sent home at parent's expense. Any camper causing property damage will be held responsible for the repair/replacement costs.
2. The use of tobacco, intoxicants, and illegal drugs is strictly prohibited on camp property. The following are NOT allowed at camp: fireworks /matches/ lighters; weapons of any kind: guns/knives; aerosol insect repellent; pets. Electronic devices (games/cell phones/ music players of any kind) must be turned in at the beginning of camp. Extremely limited use of cell phones may be allowed by camp directors in emergencies.
3. It is expected that youth will dress modestly and appropriately. The issue of modesty will be judged by the camp staff. The following items are not allowed: clothing with holes in inappropriate places, spaghetti straps, clothing with words or illustrations associated with alcohol, drugs, tobacco, offensive language, or sexual innuendos. Clothing must cover all undergarments. Two-piece or low-cut swim suits be worn with an opaque t-shirt. If clothing items are in question, please do not bring them.
4. Public display of affection between boyfriends and girlfriends is not appropriate for camp.
5. Do not bring your own candy, food or pop. Healthy snacks will be available for purchase at camp. Food and drink will be confined to designated areas and consumed at designated times. Food or drink found outside of these areas will be taken from the camper. Money sent to camp for the purchase of snacks will be the responsibility of each individual camper.
6. Campers will remain in open areas of camp. Trails and wooded areas are to be used only with adult supervision. The Director's office is off limits to everyone except camp staff. Campers will stay within their own gender appropriate dorms.
7. Campers are encouraged to clear their schedule for the week of camp in order to participate fully in the fellowship and learning. No one is permitted to leave the camp without permission from the Director. Campers must have parent signed permission to leave camp.
8. Occasionally images are taken of children/youth participants during church ministry related activities. By signing below you are giving permission to use these photos/videos for a variety of church purposes including the church website, newsletters, church presentations, worship, as well as in local media such as newspapers. No identifying information regarding your child will be shown. Pictures and videos will not be sold. Campers are expected to cooperate with requests made by photographers/videographers. (If you do not want to authorize this, please see the church office for an alternative Rules of Conduct Form.)

I will pick up my child by 9:00 a.m. (10:00 a.m. for 10th, 11th, 12th Grade) on the day that camp ends. I realize that adult supervision will not be provided prior to the camp registration and after camp closing.

Your signature confirms that you have read and agree to the above rules.

Parent/Guardian signature

Last Update: 4/26/17

2017 HEALTH FORM

Camper Name: _____

Parent /Guardian Phone #s: (1) _____ (2) _____

(3) _____ (4) _____

Parent/Guardian Email(s): _____

Medical Concerns: (Check all those that apply)

Asthma Sleep Walking Epilepsy Diabetes Bed Wetting
 ADD/ADHD Migraines Allergies– List Below

Food Allergies and Restrictions: _____

Special Needs or Concerns including Allergies or chronic illness not listed above: _____

Additional Information: Optional– What would you like us to know about your child that would make for a good camping experience? _____

Insurance information: Company _____ Policy # _____

Name of policy holder _____ Group # (if applicable) _____

Please provide a copy of your insurance card.

Date of last physical (Must be within 3 years) _____

Vaccinations – Yes No Date of last tetanus shot _____

EMERGENCY PERMISSION

Once in a while a situation occurs where a camper must be treated at a local doctor's office or hospital. We need parental permission to take such action. **Signing below gives us permission to transport your child by bus or personal vehicle** and to **take appropriate action** should your camper become ill or suffer some kind of injury requiring medical attention.

In certain cases, if a camper becomes ill while at camp, it is our policy **to send the camper home**. (The designated camp health personnel will follow policy in identifying illnesses where it is necessary to send a camper home.)

Signing below indicates I understand and agree to these policies:

Parent Name – Print _____ Signature _____ Date _____

If parent cannot be reached, please provide contact person other than parent:

Emergency Contact: _____ Relationship to Camper: _____

Emergency Phone Numbers: _____

If your child becomes ill and you are not home (or you live outside a 30 mile radius), please identify an alternate person within 30 mile radius who can **immediately** pick up camper.

Name of other designated family/person to pick up camper _____

Their Phone _____ Relationship to Camper: _____

MEDICATION FORM

Note: This section is for campers who will be taking medication of any kind.

Campers with medication:
Please provide a current photo to insure 100% accuracy in administering medication.

Camper Name: _____

NO MEDICATION, NEITHER PRESCRIPTION NOR OVER THE COUNTER, WILL BE GIVEN WITHOUT THE WRITTEN PERMISSION OF THE PARENT OR GUARDIAN.

Camp Wakonda agrees to assist in providing your child the medication(s) listed below for over the counter drugs per parent/guardian instructions or for other drugs prescribed by a doctor. Please note that Tylenol or ibuprofen cannot be administered unless you provide it and give instructions on doing so here! We take no responsibility for medications that your child refuses.

ALL PRESCRIPTION MEDICATION MUST BE IN THE ORIGINAL CONTAINER, LABELED WITH THE CAMPER'S NAME, NAME OF THE MEDICATION, CURRENT DOSAGE AND TIME TAKEN, PHYSICIAN'S NAME AND PHARMACY NAME.

All over-the-counter medication must be in the original container, labeled with the camper's name, dosage, time and purpose for which it is to be given.

ALL MEDICATION WILL BE COLLECTED BY DESIGNATED CAMP STAFF UPON ARRIVAL AT CAMP. DO NOT USE DAILY DOSE CONTAINERS!

PLEASE NOTE: If your child needs to be on medication to be successful at school, he/she should be on the same medication to be successful at camp.

Medication Name/ Over the Counter Drugs	Reason for use	Dosage	Frequency

I hereby grant permission for Camp Wakonda staff to supervise the preceding medication routine for my child during his/her camping experience.

Parent/Guardian signature _____ Date _____