



WINTER CAMP 2023

9th-12th Grade: Jan. 14th @ 10am - Jan. 16th @ 10am

3rd-8th Grade: Feb. 10th @ 6pm - Feb. 12th @ 2pm

Campers are invited to join us for 3 days and 2 nights of winter fun, friends, and faith! It's just like summer camp, but with snow tubing, hot chocolate, and a movie night! Winter Camp includes your favorite camp activities - vespers, morning watch, Bible study, nature, crafts, singing, games, and, of course, great food and fellowship! Campers stay in our winterized cabins and retreat facilities, fully supervised by trained staff.

The cost for the weekend is just \$145 per person and includes 2 nights of lodging, 5 meals, 2 snacks, a snow-tubing ticket and transportation, staff leadership, activities and supplies, a group photo, and an apparel item.



Brethren Woods

camp and retreat center

BRETHREN WOODS' 2023 WINTER CAMP REGISTRATION FORM

To register, visit our website at www.brethrenwoods.org/wintercamp or send this completed form and \$145 registration fee to Brethren Woods at 4896 Armentrout Path, Keezletown, VA 22832. Registrations are due by Jan. 2nd or Feb. 2nd.

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____ Home Phone Number: (____) _____
Street and Number City State Zip Code

Home Church: _____ Church Support Contribution Amount: _____

Current Grade: _____ Date of Birth: _____ Age: _____

Sex: M F Height: _____ Weight: _____ Cabin-Mate Request: _____

Parents/Guardians: _____
Name Phone Number E-mail Address

Emergency Contact: _____
Name Relationship Phone Number

Information that May Be Helpful to the Camp Staff and Your Child's Counselors (hobbies or special interests, fears, bedwetting, homesickness, life situations, concerns, behavioral/medical/emotional/dietary special needs, etc.) _____

Permission and Authorization: I certify that the camper registering is in good health and may participate in the activities for Winter Camp. I authorize the officials of Brethren Woods to act in an emergency and give permission to the physician selected by Brethren Woods to hospitalize, secure proper treatment, and/or order injection, anesthesia, or surgery for the camper named on this form. I will abide by the camp's decision should it be necessary to send the camper home for any reason, including illness and behavior. I give Brethren Woods and partner organizations permission to use photos and video recording of the camper for publicity purposes. I agree that the camper will abide by all regulations for personal conduct and the use of camp property, will participate fully in the camp program, and will accept the camp's decision regarding area assignments.

Camper's Signature

Date

Parent/Guardian Signature

Date