



JOURNEY CAMP '24

June 17-21, 2024
Permission Slip



Parents,

This letter is simply to keep you informed of the upcoming Event and guidelines we will be following:

1. We are travelling from Grace Community on Monday, June 17th. We will be staying at Journey Camp in Spicewood, TX until Friday, June 21st.
2. We are travelling in a Charter Bus from Sun Travel. We will have a leader driving separately as well.
3. We are allowing students to bring cell phones, tablets, and mp3 players, but these will be confiscated if overused. If you have an emergency, please contact one of our leaders.
4. All leaders will carry cell phones for communications. Their numbers are listed below.

Location: Grace Community Fannett | 22044 Burrell-Wingate Rd. | Fannett, TX 77705
Journey Camp | 5902 Pace Bend Rd N | Spicewood, Texas 78669

Schedule: Arrival to Grace on **Monday, 06/17/2024 @ 9:00am**
Parent Pick up from Grace on **Friday, 06/21/2024 between 3:30pm-4:00pm**
*****(the pickup time will vary depending on traffic conditions)*

Leaders: Anthony Cardinale (228) 363-4826
Scott Simmons (409) 540-0324
Jodi Piazza (409) 433-1087

What to Bring:

- ✓ A desire to grow closer to God!
- ✓ A Bible, Notebook, & Pen (optional)
- ✓ Funds to purchase items at the event. (optional)
- ✓ Clothes & Hygiene products for the 5 days we are at camp. (Including toothbrush, toothpaste, soap shampoo, etc...)
- ✓ **Closed toed shoes** for outdoor activities. (you may bring other shoes for other times)
- ✓ Blanket/Sleeping Bag, pillow, towels, wash rags, linen for bedding, etc...
- ✓ Water Bottle & Sun Protection

*****If your student takes medication, please provide a list with details the medication & of when to take the medication. For security and safety reasons, the camp will hold all medications for students. Please have their medication in the ORIGINAL PERSCRIPTION BOTTLE AND a bag that encloses medicine with the student's name on it.*



SUMMER CAMP '24

June 17-21, 2024

Permission Slip



As a parent/legal guardian of _____(here after known as “my Student”), I have been informed about the details of the **Event on June 17-21, 2024** and give permission for my Student to be involved in the overall activities.

1. I/We have reviewed the rules of the activities and agree that my Student will abide by them.
2. I/We also acknowledge that if my Student has to return home early for disciplinary violations, it will be at the parents/guardians expense. OR the parents/guardians will need to pick up the student from the Event Location.
3. I/We understand all reasonable safety precautions will be always taken by Grace Community, Sun Travel, Highland Lakes Camp and Conference, their staff, and volunteers during the events and activities.
4. I/We authorize any treatment by an accredited hospital and/or physician deemed necessary for my Student in case of an emergency. *(If this occurs, you will be notified as soon as possible.)*
5. I/We understand the possibility of unforeseen hazards and know the inherent possibility of risk.
6. I/We agree not to hold Grace Community, Sun Travel, Highland Lakes Camp and Conference, employees, and volunteer staff liable for damages, losses, diseases, or injuries incurred by my Student.
7. I/We authorize Grace Community and Highland Lakes Camp and Conference, their staff, and volunteers to hold and administer medicine for the student as needed. (Parents will need to provide a list of medication, information on when to take it, and a bag that encloses the medication.)
8. PHOTO DISCLAIMER - By participating in Grace Community's services, ministry activities, classes, programs, events, etc.: (i) you consent to be photographed, videotaped or otherwise recorded; (ii) you grant your permission for GC to use recordings containing your image, likeness, voice or statements, without compensation, credit or other consideration to you, for GC's promotional, publicity and other purposes, throughout the world and in perpetuity; and (iii) you agree to release, hold harmless and indemnify GC from any and all liabilities and claims involving the use of your image, likeness, voice or statements.

For a full photo disclaimer, please go to <https://www.gcfannett.com/about-1>.

Parent/Guardian Name (Please Print)

Parent /Guardian Signature

Date

_____/_____/_____
Address/City/Zip

(_____)_____
Home Phone #

(_____)_____
Emergency Phone #

Health/Med. Ins. Co.

Policy Number