



Weekend Camp Leaders Packet

Thank you for choosing to Camp His Way this summer! The following checklist will help you in your camp booking:

Camp Booking Checklist

- Return the contract along with a deposit of \$25 per person before March 15 for June camps, April 15 for July/August camps. **(\$75 total price: \$25 deposit, \$50 balance)**
- Make sure parents receive the **camper application***, policies and what to bring page.
** Please make copies of **application front and back**.*
- Have all attending adults complete the camper application as well as the counselor background check application.
- **Send in a master roster list of all campers and counselors, complete with names, gender, and ages at least 2 weeks prior your weekend.**
- Pre-screen your campers for lice and illness. (www.camphisway.com/lice)
- Arrive at camp at 5:30pm on Friday. (Please don't arrive early, the week long camp doesn't leave until after 3pm on Friday and we will be cleaning the camp for your arrival).
- Bring your completed applications **to camp registration**.
- Bring final payment amount.

If there are any questions feel free to contact us.

We hope you have a great time Camping His Way!

Camp His Way
561 McGilberry Rd
Zavalla, TX 75980

936-897-9974 or 1-888-CAMP-HIS
Fax: 936-897-3274

info@camphisway.com
www.camphisway.com

WEEKEND MINICAMP CONTRACT

Between **CAMP HIS WAY, INC.** and

GROUP:

Minicamp dates: _____ **Number to Attend:** _____ **Cost per Person \$75**
Time of Arrival at Camp: FRIDAY AFTER 5PM **Time of Departure: SUNDAY BEFORE 1PM**
Meals: Friday Dinner, Saturday Breakfast, Lunch Dinner, Sunday Breakfast, Lunch

DEPOSIT: We agree to pay Camp His Way for a guaranteed minimum deposit of _____ people at \$25 per person, which equals \$_____, this will confirm our reserved dates. Once the deposit has been made and this contract has been signed by both parties, we are obligated to the terms and no other alterations can be made after 90 days prior to the beginning of this minicamp.

COST: We agree to pay Camp His Way for a guaranteed minimum of _____ people at \$50 per person, which equals \$_____.
*cost is \$80 per person if deposit not received before due date

LINENS and FACILITIES: Linens are not provided. All beds are twin size. Guest must bring bedding and towels. For day only camps, minimum facilities will be available for swimsuit changing and restroom purposes only.

CAMPERS and COUNSELORS: Campers for day camps, summer camp, and weekend minicamps are children ages 6-12. Counselors are responsible adults over 18 years of age acting as chaperones for their group. Groups attending camp are required to bring one counselor/chaperone per 10 campers. Camp His Way staff will run the activities and programs for all kids groups. Groups are responsible for running adequate background checks for their counselors before arriving at camp.

PROGRAMMING: For children (ages 6-12), Camp His Way will provide all programming, activities and scheduling.

PAYMENT: It is agreed that payment of any balance due, including any damages, shall be made upon arrival to Camp His Way.

CANCELLATION: It is agreed that this Agreement may be canceled at any time prior to 90 days before the beginning of this minicamp. In doing so, the deposit will be refunded. If cancellation occurs within 90 days before the beginning of this retreat, we understand that our deposit will be forfeited.

HOLD HARMLESS AGREEMENT: We agree to indemnify and hold harmless Camp His Way, Inc., its officers, agents and employees from and against every expense, including attorney's fees, liability or payment by reason of any damages or injury to persons (including death), or property (including loss of use or theft thereof) arising out of or in connection with the conference, including use or occupancy of Camp His Way property, facilities or equipment, provided that such damages or injury are caused in whole or in part by the group, as above defined, its officers, agents, employees or participants. We agree that every camper/counselor will complete and turn in the CHW Medical and Release Form upon arrival to Camp.

CONDUCT: We have read the policies of Camp His Way and agree to abide by them while at Camp His Way.

AGREEMENT: I certify that I am authorized to sign this Agreement on behalf of the above-mentioned group or organization. I promise to abide by the Policies and Rules of Camp His Way. I understand that full payment of the fees is due and payable before we leave the Camp. I have read the Camp policies and understand that it is a part of the Agreement.

Authorized Signature

Date

Printed Name: _____ **Title:** _____

Home Phone: _____ **Office Phone:** _____ **Cell Phone:** _____

Church Phone: _____ **E-Mail:** _____

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

SPECIAL NEEDS: _____

FACILITIES WILL BE RELEASED FOR BOOKING IF YOU DO NOT RESPOND BY:

March 15 for June camps, April 15 for July & August

Camp His Way – 561 McGilberry Rd – Zavalla, Texas 75980 – (936) 897-9974 – info@camphisway.com

Weekend Camp Application Camp His Way Summer 2017



561 McGilberry Rd
Zavalla, TX 75980
info@camphisway.com 936-897-9974

Camper Information

Name: _____
First Last Goes By

Attending Group: _____ Reserved Dates: À

Age at time of camp: _____ Birthdate: _____ Siblings Attending with Camper: _____
Month/Day/Year

Gender: M / F

Parent Information

Parents Info: _____
First Last

Address: _____
Street

_____ City State ZIP Code

Phone 1: _____ Phone 2: _____

Phone 3: _____ Email: _____

Other Emergency Contacts: _____
First Last

Phone 1: _____ Phone 2: _____

Phone 3: _____ Email: _____

Camper Medical Information

Camper's Insurance Carrier _____ Group # _____

Medication Allergies: _____

Reaction and Management: _____

Food Allergies: _____

Reaction and Management: _____

Other Allergies: _____

Reaction and Management: _____

Medications Being Taken at Camp:

Med #1: _____	Dosage: _____
Time to be taken: Breakfast / Lunch/ Dinner/ Bedtime	Reason for Med: _____
Med #2: _____	Dosage: _____
Time to be taken: Breakfast / Lunch/ Dinner/ Bedtime	Reason for Med: _____
Med #3: _____	Dosage: _____
Time to be taken: Breakfast / Lunch/ Dinner/ Bedtime	Reason for Med: _____

I have read this material carefully and I agree to the legal release, camp policies, and back page.

<i>Printed Name</i>	<i>Signature</i>	<i>Date</i>
---------------------	------------------	-------------

Camp Fees

Weekend Camp - \$75 (includes all lodging, meals, snacks and activities)
\$25 deposit required before March 15 for May/June camp dates; April 15 for July/August camp dates
**camp price is \$80 if deposit received after due date. Gluten Free Menu +\$10*

Departure and Arrival Times	Other Available Items
Weekend Camp Arrival 5:30PM Friday. Gates will not open before 5:00PM. Dorms are pre-assigned, no need to rush. Weekend Camp Departure Sunday 1PM	You may send money with your camper for the camp giftshop for Friday after lunch: DVD of your weekend at camp: \$12; USB \$15 Several T-Shirt designs: \$15 Several hat designs: \$15 Parental permission is required to purchase any marksmanship equipment.
Medication	Lice Information
Bring only the amount of medication needed for that weekend in the original pharmacy container . All medication, vitamins, etc, of any kind will be given to the camp nurse on arrival.	For health reasons we screen all campers for lice upon arrival to camp. Please save your child embarrassment and hassle by prescreening them before they arrive. You can find more information on this @ www.camphisway.com/lice
Visitors, Early Departures & Late Arrivals	Standards and Responsibility
For safety reasons and compliance with Texas Youth camp codes, we must ask that the only time parents visit is at registration and departure. Campers arrive and depart ONLY on the scheduled times. NO late arrivals or early departures.	CHW strives for the highest physical, mental and spiritual standards possible. No smoking or use of tobacco, alcohol, abusive language, drugs (except prescribed medicine which is kept by camp staff), or any other such items or behavior of questionable nature are allowed. We are happy to help parents with children who have difficulties in specific areas of their life and we appreciate parents' communication with us concerning these needs, however, we protect our campers from influences which we feel to be detrimental, degrading, destructive or not in keeping with Christian standards. We reserve the right to send any camper home who violates these standards. Every reasonable effort is made to protect each camper's health and safety through training of staff, constant inspection of equipment and instruction of campers; however, CHW assumes no responsibility for accidents, illness or loss of life, mental trauma, nor loss of personal equipment by fire, theft, natural disasters or camper's carelessness. CHW has implemented numerous safety policies for the protection of all campers. Please pray with us concerning these matters. Thank you for taking the time to help your child have the most wonderful camping experience possible. We have found all of the things listed here to be important to the camper and to us. Thank you for choosing CHW.
What to Bring	What Not to Bring
Bedding – Twin size sheets or sleeping bag Closed toe shoes for activities Swim shoes (not flip-flops or crocs) for swimming Swim suit – (girls- one piece works best on waterslide) Towel, toiletries, play clothes, etc. Bible Offering to help complete new dorm Flashlight (optional) Anything you might want for Thursday's Talent show Write your camper's name on everything	Campers are not allowed to bring radios, MP3 players, cell phones, computers, video games, media players, chemicals, fireworks, lighters, matches, prank material (like silly string etc.) or weapons. Snacks will be confiscated upon arrival to keep our dorms critter free.
Contact	
Phones are not available to campers - if you have an emergency you may contact the camp office @ 936-897-9974; info@camphisway.com You may email your camper from the camp website @ www.camphisway.com	

Release – Sign on Front Page

- I am the parent or legal guardian of the herein-named child (camper) named above and have legal custody of the child during the above stated dates.
- I hereby apply for registration for the camper for the camping services indicated in this application.
- I agree to the price and terms as stated in this application for admission.
- I give my child permission to participate in all camp activities and programs.
- I have read the camp policies and application and agree to abide by the conditions outlined.
- I hereby give the camp officials permission to act on my/our behalf in case of an emergency.
- I hereby give the group leader and/or camp officials permission to administer listed medications to my child.
- I understand that I will be held responsible for any medical expenses incurred.
- I agree to release and indemnify CHW from any and all claims for damages arising as a result of any accident, injury, or otherwise sustained by the herein named child arising from participation in any camp activities.
- I will be held responsible for any damages my child may cause to the camp, facilities or any other property.
- Unless otherwise noted on this form, my camper can be picked up from camp by the parents and contacts listed above.
- I consent to the use by CHW our camper's image in camp photographs, videos, social network and new media and forfeit any monetary claim for any usage.



Camp His Way Confidential Counselor Application

This application is being completed by all applicants for any position involving the supervision, contact or custody of minors. It is being used to help the camp provide a safe and secure environment for those children and youth who participate in our program and the use of our facilities. Camp His Way and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security number and date of birth.

Print Name: First _____ Middle _____ Last _____ Maiden _____

Birthdate (mm/dd/yyyy) ___/___/____ Social Security Number _____ - _____ - _____ Race _____

Sex ___ Cell Phone (____) _____ Home Phone (____) _____ E-mail _____

Marital Status _____ Number of children ___ Ages _____ Drivers License _____ Type _____

Address _____ City _____ State ___ Zip _____ County _____

If you have moved recently please include your previous address:

Address _____ City _____ State ___ Zip _____ County _____

Present Employer _____ How Long? _____

What Church do you attend? _____ How Long? _____ Have membership? _____

Have you ever been convicted of a felony or a misdemeanor? Yes No

Have you ever been accused of child abuse or a crime involving actual or attempted sexual molestation of a minor? Yes No

Applicants Statement

The information contained in this application is correct to the best of my knowledge. I authorize any reference or church listed on this application to give you any information they may have regarding my character and fitness for children’s work. I release all such references from the liability for any damage that may result from furnishings of such evaluations to you and I waive any right that I have to inspect the references provided on my behalf. Should my application be accepted, I agree to be loyal to the camp director and camp policies of Camp His Way. I agree to refrain from unscriptural conduct in the performance of my services on behalf of Camp His Way. As a worker applicant for Camp His Way, I have been requested to furnish information for use in determining qualifications. In this application I do hereby authorize the release and full disclosure of any information that you may have concerning my volunteering with Camp His Way.

I authorize you to release my information about my background including, but not limited to, information as to my employment, education, military service, driving record, criminal record and/or public records history to those employees or agents of Camp His Way who require such information in order to make a decision with respect to any matter pertaining to my status as a volunteer counselor. I hereby release Camp His Way, its employees and anyone acting on behalf of CHW from any claims, liability and/or any nature which may result from furnishing the information requested, including, but not limited to, claims of negligence.

I have read the camp policies and application and agree to abide by the conditions outlined.

I hereby give the camp officials permission to act on my/our behalf in case of an emergency.

I agree to release and indemnify CHW from any and all claims for damages arising as a result of any accident, injury, or otherwise sustained by participation in any camp activities.

I consent to the use of CHW any photographs, videos and new media.

Signature _____ Date _____

What to bring

Bedding
Closed toe shoes
Swimming suits
(girls, one piece works best on the waterslide)
Towel, washcloth
Toiletries,
Dirty Clothes Bag
Old shoes or water shoes (not flip-flops)
Flashlight, Bible
Shirts and Shorts
Underclothes and socks
Offering for new dorm

Write you name on everything

Contact

936-897-9974
561 McGillberry Rd
Zavalla, TX 75980
You can Email your camper at:
www.camphisway.com/campermail
All minicamp campers arrive from @ 5:30 pm on Friday.
Minicamp Groups depart Sunday @ 1:00pm

Medication

If Medication is needed, bring only the amount needed for the weekend at camp, in the **original** pharmacy container. All medication will be given to nurse on arrival. Have your medication listed on your camper application.

Available Items

You may send money with your camper for a DVD of your weekend at camp, with hundreds of pictures and video = \$12; Flash Drive: \$15

T-Shirts = \$15
Several Hat types = \$15

What not to bring

No tablets, phones MP3 or media players, video games. No fireworks, lighters, matches, knives or weapons of any type are allowed. Snacks will be confiscated upon arrival to keep dorms critter free.

Contact number _____
Arrive at Church _____ Pickup from Church _____

What to bring

Bedding
Closed toe shoes
Swimming suits
(girls, one piece works best on the waterslide)
Towel, washcloth
Toiletries,
Dirty Clothes Bag
Old shoes or water shoes (not flip-flops)
Flashlight, Bible
Shirts and Shorts
Underclothes and socks

Write you name on everything

Contact

936-897-9974
561 McGillberry Rd
Zavalla, TX 75980
You can Email your camper at:
www.camphisway.com/campermail
All minicamp campers arrive from @ 5:30 pm on Friday.
Minicamp Groups depart Sunday @ 1:00pm

Medication

If Medication is needed, bring only the amount needed for the weekend at camp, in the **original** pharmacy container. All medication will be given to nurse on arrival. Have your medication listed on your camper application.

Available Items

You may send money with your camper for a DVD of your weekend at camp, with hundreds of pictures and video = \$12; Flash Drive: \$15

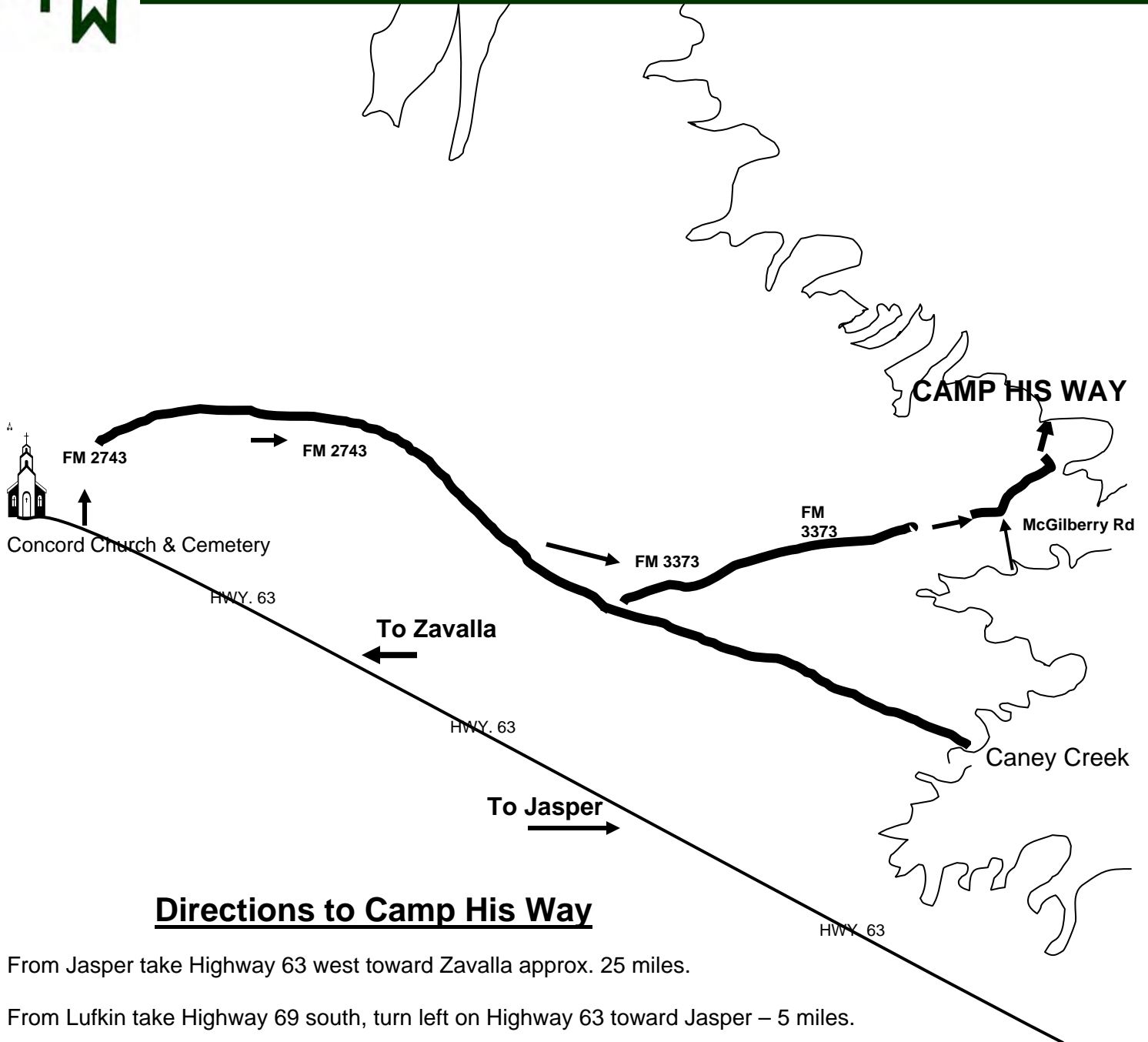
T-Shirts = \$15
Several Hat types = \$15

What not to bring

No tablets, phones MP3 or media players, video games. No fireworks, lighters, matches, knives or weapons of any type are allowed. Snacks will be confiscated upon arrival to keep dorms critter free.

Contact number _____
Arrive at Church _____ Pickup from Church _____

Directions to Camp His Way



Directions to Camp His Way

From Jasper take Highway 63 west toward Zavalla approx. 25 miles.

From Lufkin take Highway 69 south, turn left on Highway 63 toward Jasper – 5 miles.

From Beaumont take Highway 69 north, turn right on Highway 63 toward Jasper – 5 miles.

1. Turn on **FM 2743** (Concord Baptist Church & Cemetery)
2. Stay on **FM 2743** for about 4 miles
3. Turn left on **FM 3373** (sign-Black Forest Community)
4. Go 1½ Miles
5. At “Y” stay to the right, follow curve for 0.3 miles
6. Turn left – McGilberry Road (Angelina Road 334) go ½ mile
7. Camp on left – wood fence – Camp His Way Sign

For your GPS: Latitude N 31 09' 17"; Longitude W 94 15' 49"



Camp His Way Policies

Group Leader: Please make a copy of these policies available to each member of your group.

Check-in: At arrival, our Host will check you in and confer with you regarding your schedule to verify meal and meeting times. Please have payment and retreat waiver forms ready for turn in on arrival.

Parking: All vehicles must be parked in the designated parking area. Please do not drive vehicles through camp.

Bedding: Campers must furnish their own bedding, pillows and towels. Bunks are twin size.

Leadership: Sponsors must maintain supervision of all members of their group. There is a required ratio of 10:1 for minors. You are responsible for background checks.

Payment: Payment is due upon arrival. Any damages must be paid for before departure.

Meals: At check-in, you must report to the Host the number of people in your group at each meal and meal schedules.

After meals, please have campers take dishes to the designated area, scrape and stack neatly. No glasses, dishes, etc., are to be taken from the dining area.

Waterfront Activities:

- Canoeing and boating are allowed only when Lifeguard is on duty. Camp is not responsible for any water activities off the camp property.
- Life jackets must be worn at all times for boating and canoeing.
- After each recreational time, remove all canoes from the water and place life jackets on the rack.
- Leaders must be present at the waterfront when any minors are at water activities.
- Anyone failing to comply with rules of the Camp and applicable State laws shall be denied water activities.
- Inclement or approaching inclement weather conditions will result in the cancellation of water activities until weather conditions are deemed safe by the Camp Director.

Legal Waiver:

All Guests must complete and sign the retreat release waiver and turn in at arrival to the Camp.

Security: Camp gates are locked after group's arrival to keep a secure campground and monitor in and out traffic. If a guest needs to leave early please notify camp staff.

Snacks: Typically, personal snacks are not needed because our food is the best around. Yet, if still brought, there are no snacks allowed in the dorms.

Activities: All activities must be scheduled and approved through the Director. Equipment will be made available. Camp His Way will provide supervision when necessary.

Program: A copy of your schedule (for weekend adult and youth retreats) should be submitted to the camp no later than two weeks prior to arrival.

Departure: Groups are to leave upon times stated on the camp/retreat contract.

Dress:

SHOES MUST BE WORN AT ALL TIMES.

For safety reasons water shoes must be worn in the lake while swimming.

All guests must dress in keeping with modesty and Christian ideals.

Restrictions:

- No alcoholic beverages, tobacco in any form, narcotics or illegal drugs of any kind are permitted on the Campgrounds.
- Over-the-counter and prescription drugs in their original container are permitted but must be kept out of reach of children.
- Because of the health and fire hazard, smoking is NOT permitted on camp property.
- All profanity, immoral conduct of any nature, and immodest dress are forbidden at Camp His Way.
- Males and females must not visit each other's dorms.
- No Pranks of any sort.
- Pets are not allowed to visit. We have plenty available.

First Aid: First aid and emergency care will be available. The First Aid station is located by the Camp Office. Emergency procedures are posted. The Camp Director should be notified of any emergency.

Phones & Internet: Landline phones are only available for emergency use. It is a business and we ask that calls be limited. We have slow rural password protected Wi-Fi available to share with only with group leaders.

Head Lice Policy

Each camper will be examined for head lice and illness (fever) upon arrival. If nits or lice are present, **campers will be turned away** with no refunds issued. If a camper is sent home, the camp is not responsible for expenses incurred in picking up the camper.

We want your time at camp to be a pleasant and enjoyable experience, so please take the following precautionary measures to see that your camper is ready for the total camp experience:

1. Parents should do a head lice check on their children two weeks before camp.
2. Group Leaders should do a head lice check of the group on the day of departure to make sure no one in the group is infested.

We have provided the following information to help you in your head lice checks and to provide you with materials for informing parents of our policy concerning head lice.

What are they?

Head lice are small grayish-white insects, which are found in the hair, behind the ears, and on the nape of the neck. They live on human blood and their bites cause itching and scratching. These bites can lead to infection.

How can they be recognized?

The adult louse is about the size of a sesame seed. They attach their eggs (called nits) to strands of hair close to the scalp. Nits are tiny, pearl gray, oval shaped specks that are attached firmly to the hair. These may hatch in 1 week, but have been known to survive for 10 days. Frequent scratching of the head is usually the first clue of infestation.

How long does it take from exposure to infestation?

One to two weeks.

When are they contagious?

As long as there are live lice and eggs.

How are they spread?

They are spread from direct contact with an infested person or from personal items of the infested person such as combs, brushes, pillows, bedding, clothing, head coverings, or furniture. Since they need a human scalp for food and warmth, the louse dies when away from the human body for 48 hours.

LICE TREATMENT:

(Not recommended for use on infants under two months without consulting a health care provider.)

1. Examine the heads of all family members and other close contacts, and treat everyone with any signs of lice at the same time.
2. Shampoo the hair first with your regular shampoo (make sure shampoo **DOES NOT** contain cream rinse), then use one of the following medications:
Nix Cream Rinse is available without a prescription.
 - a. A sufficient amount should be applied to saturate hair and scalp (especially behind the ears and the nape of the neck).
 - b. Leave on hair for 10 minutes, no longer.
 - c. Rinse with water.
 - d. A single treatment appears adequate because this product stays in the hair for at least two weeks.**RID** (comes with a fine tooth comb), **A-200 Pyrinate** (liquid or gel) or **R & C** all are available without a prescription. **DO NOT USE IF ALLERGIC TO RAGWEED.**
 - a. Apply 2 ounces of liquid OR a 1-ounce tube of gel to **dry** hair and scalp, being careful to avoid contact with eyes, nose and mouth. If product should get into the eyes, immediately flush with plenty of clean water.
 - b. Rub the hair vigorously in all directions for 2-3 minutes to insure contact with the lice and nits (eggs). Allow medication to remain on the hair no longer than 10 minutes.
 - c. Wash hair thoroughly with warm water and a good shampoo and dry with a clean towel.
 - d. Remove nits (eggs) with a fine toothed comb. (You may loosen nits by using a cream rinse or by applying ½ vinegar to ½ water solution before combing.)
 - e. One application will kill the lice and most nits. Use regular shampoo to wash your hair as needed after 24 hours. **IMPORTANT: Repeat medication application in 7-10 days.**
3. It is **extremely important** that clothing, caps, hats, combs, bedding, stuffed toys, and other articles in contact with the person's head are thoroughly laundered or cleaned. Eggs and adult lice are killed after **5-10 minutes** at **125 degrees**.
 - a. Soak combs and brushes for 1 hour in Lysol solution.
 - b. If wash water is not very hot, add boiling water to the washer before adding clothes.
 - c. Tumble clothes for **5-10 minutes** in a commercial dryer.
 - d. Articles of clothing that require professional cleaning should be dry cleaned.
 - e. Items such as stuffed toys can be placed in a plastic bag and sealed for **10 days**.

If these procedures are not done, treated persons may become reinfested when they use these articles again. Fumigation of the home is not recommended. Cleaning of the house and furniture inhabited by infested individuals should be limited to thorough vacuuming.

TO PREVENT INFESTATION WITH LICE:

1. **DO NOT** share combs, hairbrushes, hats, coats, scarves, and other such items.
2. Coats and wraps should be hung where they do not touch items of other people.
3. When one family member is found infested, all family members should be examined. If condition continues after treatments, contact your doctor or nurse practitioner.