

Senior High Winter Retreat  
EAGLE ROCK



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January 18-21, 2019  
Student Information Packet

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## IMPORTANT INFORMATION:

### FORMS:

1. Church: If we do not have an updated form on record for you, we need it before you can attend this trip. It's toward the back of this packet. Not sure if that is you? Ask Melissa at [Melissa@sjlife.com](mailto:Melissa@sjlife.com)
2. Eagle Rock: ER requires that every individual who will be at camp, fill out an ER release form. It is included in this packet.

### EXTRA MONEY:

1. You will need money for meals going up and returning.
2. You may also wish to purchase an Eagle Rock sweatshirt or snacks from the snack bar. \$20 -\$40
3. Lastly, paintball is an additional cost (\$6) and the down the mountain excursion allows you to shop. What you buy is up to you.

### MEALS:

1. If you have a special dietary need (peanut allergy, etc.) please indicate that on your release forms. If you are Gluten Free the camp ask that you prepare to send \$10 more so they can accommodate this for you!
2. You can expect to pay for 2 meals total while on the road. 1 Up! 1 Down!

### ACTIVITIES:

1. Offered are rock climbing and rappelling, hanging out, eno-ing included in price
2. Also high ropes, hiking, and paintball (\$6), and biking, excursion

### CELL SERVICE/ADDRESS:

1. Won't work up at Eagle Rock. If you have an emergency call: 865-983-6165
2. For care packages send to Eagle Rock Camp, PO BOX 5405, Maryville, TN. 37802  
You would want to mail a CP a week in advance.



# RULES, RULES, RULES!

## **Golden: The Browning Rule-**

Browning's word is law. Break it and he'll break you!

## **I. The Purpling Rule-**

Guys are blue, Girls are Pink. Mixed, they make purple, and that would stink! Stay out of each other's dorms! - NO PURPLING

## **II. The No Excuse Rule-**

Attendance at all scheduled meetings is mandatory.

## **III. The I'm Not Tired Rule-**

YES, YOU ARE! Lights out means lights out.

## **IV. The "I Don't Know" Rule-**

I better not hear this from you or from your counselor when I ask, "Where is your counselor or where is your student?"  
Your Counselors should know where you are at all times.

## **V. The "OOOPS" Rule-**

No food or dishes are to leave the cafeteria.

## **VI. The "I'll pay for It" Rule-**

If you broke it, yes you will!!

## **VII. The Stupid Rule-**

If you think you are doing something stupid and will probably get in trouble for it, then you probably will, SOOOOO...DON'T BE STUPID

## **VIII. The "We told you not to Bring It" Rule-**

We told you not to bring it. Thanks for your contribution to our contraband pile.

# Schedule for the Weekend

## Friday January 18<sup>th</sup>

Parents if your kids are in school this day please arrange for early release as we like to get to camp early and for road conditions. We will only ask for this concession on rare occasions. If this is an issue please contact Browning!

- 10:00 am Depart
- 12:00 pm Lunch
- 5:00 pm Arrive at ER/Dinner
- 7:00 pm Club 1
- 8:30 pm Small groups
- 11:30 pm Rooms- Sleep

## Saturday January 19<sup>th</sup>

- 7:00 am TAG- time alone w God
- 8:00 am Breakfast
- 9:00 am Club 2
- 10:30 am Small groups
- 12:00 pm Lunch
- 1:30 pm Rec options begin
- 6:00 pm Dinner
- 7:30 pm Club 3
- 9:00 pm Small groups
- 9:30 pm Free Time/ ER Dance, Dance, Revolution
- 11:00 pm Head to Bed

## Sunday January 20<sup>th</sup>

- 7:00 am TAG
- 8:00 am Breakfast
- 9:00 am Club 4
- 10:30 am Small groups
- 12:00 pm Lunch
- 1:30 pm Rec options begin
- 6:00 pm Dinner
- 7:30 pm Club 5
- 9:30 pm Small group  
Bonfire

Senior Sneak away!!! Waffle House!!!

## Monday January 21<sup>st</sup>

- 7:00 am TAG and Pack up
- 8:00 am Breakfast Cabin Clean
- 9:00 am Depart for Home
- 3:00 pm Arrive at Home



# What to Bring



- Bible, Notebook, pen
- Water bottle, Flashlight
- Casual Clothing
- Closed toed shoes/ Tennis shoes (for Rock climbing, and hiking)
- Jacket/ Sweatshirt- It can get below freezing, even snow, so prepare
- Sleeping bag (or bed sheets/blanket), Pillow
- Money for extra spending- meals while traveling, and the excursion
- Toiletries
- Pajamas
- Towel
- Flip Flops to wear in the shower
- Sunscreen- can be bright!
- Favorite Snacks!!

Note: Each Person is allowed **one bag and a sleeping bag/pillow**. Bunk beds are provided in cabins but no bed sheets are included so be sure to bring something to cover your bed.

# What NOT to Bring

- Drugs/ Alcohol
- Tobacco
- Firearms/ Fireworks
- Bad Attitude
- Stuff for pranks
- Electronic devices- take a break
- Pretty much anything that could get you in TROUBLE!



# EAGLE ROCK

## Confidential Medical/Health Information

Name of Participant		Age	Sex
Height	Weight	Eye Color	Date of Birth
Family Physician	Address (city, state, zip)	Phone	
Health Insurance Company	I.D. Number		
Emergency Contact Person	Emergency Phone	Relationship	
Home Address	City/State	Zip	

### Health History (please check if applicable)

<input type="checkbox"/> Dizziness, fainting spells	<input type="checkbox"/> Low or high blood pressure
<input type="checkbox"/> Back problems	<input type="checkbox"/> Heart problems
<input type="checkbox"/> Knee Problems	<input type="checkbox"/> Diabetes
<input type="checkbox"/> Severe abdominal/menstrual cramps	<input type="checkbox"/> Epilepsy or convulsions
<input type="checkbox"/> Frostbite, hypothermia	<input type="checkbox"/> Current communicable diseases
<input type="checkbox"/> Emotional impairment/disability	<input type="checkbox"/> Allergies (drugs, stings, walnuts, etc.)
<input type="checkbox"/> Recent sprains, fractures, dislocations	<input type="checkbox"/> Dietary restrictions
<input type="checkbox"/> Present use of alcohol/drugs/medicines	<input type="checkbox"/> Currently pregnant
<input type="checkbox"/> Thyroid trouble	<input type="checkbox"/> History of heart trouble
<input type="checkbox"/> Date of Last Tetanus Booster	<input type="checkbox"/> Other immunizations and dates

Swimming Ability (please circle)      Strong      Average      Weak      Non-swimmer

*Please explain any items checked or any condition, injury, or other illness requiring medical treatment which might restrict or prevent full participation in the program for which you are applying.*

I hereby authorize the Eagle Rock staff to consent to emergency examinations and/or diagnostic procedures, procurement of medical treatment, emergency surgery, or administration of necessary anesthetics, when in the opinion of any physician or surgeon of good standing such medical treatment is deemed necessary for the mental or physical health or the participant and I/we cannot be reached within a reasonable time to obtain my/our consent to treatment. This grant of authority shall not create an independent duty on the part of Eagle Rock employees to consent to treatment. If the participant is under 18 years of age, this form must be signed by parent or legal guardian.

Signature \_\_\_\_\_ Date \_\_\_\_\_

# EAGLE ROCK

## Assumption of Risk/Liability Release

I \_\_\_\_\_, am aware in signing this document for participation in Eagle Rock's program that certain elements of the activity are physically and emotionally demanding. Furthermore, I understand that certain risks and dangers, such as those listed below, exist in the activities in which I am participating. These risks include: loss of damage to personal property, injury, or fatality. The above risks may be caused by, but not limited to: travel to and from activity site, inclement weather, slipping, falling, insect bites, falling objects, immersion in cold water, hypothermia, suffering any type of accident/illness in remote areas without easy access to medical facilities. I acknowledge that while Eagle Rock and its staff will make every reasonable effort to teach me proper outdoor techniques to minimize exposure to known risks, all hazards and dangers associated with this activity cannot be foreseen. I have a personal responsibility to learn and follow the safety rules and procedures established by the Eagle Rock staff and will make them aware at any point in which I question my knowledge of these procedures or my ability to participate in any activity.

In consideration of being allowed to participate in the Eagle Rock program. I hereby personally assume for myself, or for my minor child, as the case may be, all risks in connection with said program for any injuries or dangers which may occur to myself or my child as participants and do fully and forever release Eagle Rock, its owners, employees and agents from any and all claims, demands, dangers, rights of action or causes of actions, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of the participant's commencement of the activity or use of the facilities, equipment and property of Eagle Rock except in the case of Eagle Rock's sole negligence. I understand that the activity chosen may not be the safest, but has been chosen for its interest and challenge. I do, for myself and on behalf of my minor child as the case may be, agree to indemnify and hold harmless Eagle Rock and its affiliates and the employees and agents thereof from any liability and expense for personal or property damage, or injury not caused by their negligent actions.

My signature on this document is also intended to bind my successors, heirs, representatives, administrators and assigns.

Group Name \_\_\_\_\_

Start date \_\_\_\_/\_\_\_\_/\_\_\_\_ End Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Must have parent or legal guardian sign if under 18 years old.**

Signature of participant (or parent/guardian) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_  
Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_