



SAVONA ELEMENTARY

Principal: Mr. Galloway

6665 Tingley St. Savona, BC V0K 2J0

Telephone No. (250) 373-2520 Fax No. (250) 377-2240

<http://savona.sd73.bc.ca/>

April 26, 2022

Dear Parents/Guardians;

We are very excited to announce that we are again able to take part in another Grade 4-7 year end trip. This year, students will be travelling to Eagle Bay Camp, as you have most likely already heard. Mrs. Regan, students and chaperones will be leaving the school at 9:15 am on Wednesday, June 8th and returning Friday, June 10th at 12:30 pm. Students can be dismissed upon arrival back if someone is available to pick them up. The full schedule for our stay is attached.

You will find in this package a permission slip, schedule, what to bring list, chaperone information letter and waivers for camp activities. Please read through carefully, fill out the permission slip and waivers and return them to school as soon as possible. The deadline will be May 27th for forms as we have to confirm numbers with the camp since we will be charged by Eagle Bay for the numbers attending. Please let Mrs. Regan know if you have any food allergies at least 10 days prior to arrival, so that we can pass that information along to the camp cook.

Chaperones are a big part of this trip happening. Without you, we will have no choice but to cancel the trip. We require at least 4 chaperones to make this happen which must include 2 males and 2 females. **There is a fee of \$150.00/person.** Chaperones are likely not able to participate in the 7 skill activities. A chaperone information letter is attached in the package for your review. Please let Mrs. Regan know if you are able to help chaperone as soon as possible.

The cost per student of \$160.00 is again being graciously covered by the PAC, so the cost to the student is **\$0.00.**

There will be a tuck (candy) shop open during free time, and the Eagle Bay Camp store apparel is available for purchase on the last day. So if desired, the students can bring spending money.

Thank you!

A blue ink signature of Scott Galloway, written in a cursive style.

Scott Galloway

Principal

Savona Elementary

SD #73
HIGHER RISK FIELD TRIP
INFORMATION & CONSENT FORM

Principal's approval: AS
Please return before: Fri., May 27, 2022

Activity: Eagle Bay Camp

Teacher: Mrs. Regan's Class & Gr.4 students

Location: 5055 Eagle Bay Road, Eagle Bay

Date: Wed., June 8th – Fri. June 10th, 2022

Time (s): Departure from school: 9:15 am

Arrival back at school: 12:30 pm

Overview Itinerary for the Field Trip Program: Students will be travelling to Eagle Bay for 2 nights by bus. Please see attached schedule for further details. Students will need to have a snack for the bus (granola bar or something not super messy please.) Also, please remember to pack a lunch for the first day. Upon arrival back on the last day, students are free to go home at 12:30 pm when they arrive back.

Transportation: Walking to and from the activity Transported by school bus
 Driven in private vehicles Drivers required

(Volunteer drivers must be at least 21 yrs old & have at least \$1,000,000.00 liability insurance. There must be a seatbelt for each child & no air bag on front passenger side unless the passenger is 12 yrs of age or older. Drivers must have completed a SD#73 volunteer driver form.)

Parent Helpers Required: Yes No

Lunch Required: Yes No (first day only)

Fee To Be Paid: Yes No

Amount required: \$0.00 (Thank-you PAC!!)

***This permission form must be returned for your child's participation, written notes or phone calls are not acceptable.**

PERMISSION SLIP

The following statement must be signed by the parent/guardian for students participating in Higher Risk Field Trips:

I am aware and understand that participation in the Higher Risk Field Trip involves certain inherent risks, dangers and hazards which may result in serious personal injury or death or other loss or damage to property. I am aware that downhill skiing, Nordic track skiing, snowboarding and snow-blading, ice skating, road cycling, mountain biking, adventure hiking, canoeing, kayaking, swimming in natural settings, wilderness orienteering and residential camping are dangerous activities and that in addition to the usual risks inherent in these activities, certain additional dangers and risks including, but not limited to, varying snow, ice and visibility conditions and the danger and risk of collision with natural and man-made objects. For International travel, I have been informed that the Higher Risk Field Trip may become a dangerous activity due to global unrest. Further I agree that there may be other risks not known to me or not reasonably foreseeable at this time. I release and agree to indemnify and hold harmless the Board of School Trustees of School District No. 73 (Kamloops/Thompson) "the Board", its employees and agents ("the Releasees"). From any loss, claim, or demand for any and all negligence arising as a result of the Student's involvement or participation in the Higher Risk Field Trip except where such negligence is caused by the Releasees, I understand and accept that the Board and its employees and agents may at any time cancel the Higher Risk Field Trip for appropriate reasons including travel advisories indicating international air travel is unsafe or the destination is unsafe. Accordingly, I agree to waive any and all claims against the Board, its employees and agents for any monetary loss arising from the cancellation of the Higher Risk Field Trip. I understand that during the Higher Risk Field Trip the Student may incur additional unforeseen financial expenses required for reasons of safety and I agree to waive and reimburse for any and all claims against the Board, its employees and agents for any such expenses that are reasonably required. Both my son/daughter and I understand that Board Policy #240 "Student Behaviour - Discipline" applies on all field trips. The use of alcohol or drugs and or inappropriate student conduct may result in suspension from school. Students engaging in these behaviours are liable to be sent home at their families' expense.

I have read and am informed about the proposed field trip to Eagle Bay Camp on June 8th - 10th, 2022.

I request that my child _____ (print child's name) participate in this trip.

Note any medical conditions or medication the staff or supervisors should be aware of: _____

Please supply the school with: Family Physician, Care Card Number and Emergency Numbers if they are not already on file.

Parent/Guardian Signature _____ Phone: _____ Cell: _____

I can help drive n/a students with seat belts. I can help supervise _____

Teacher/Office Use Only

Fee for Field Trip Received: Yes No Amount: _____ Initials: _____



ZIPLINE WAIVER

EAGLE BAY CAMP ZIP LINE ACTIVITY
RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTIONS OF RISKS AND INDEMNITY AGREEMENT
THIS IS A LEGAL DOCUMENT - READ CAREFULLY
BETWEEN EAGLE BAY CAMP AND:

NAME OF PLAYER: _____

PHONE #: _____

MAILING ADDRESS: CITY: _____

POSTAL CODE: _____

PARTICIPANT (OR GUARDIAN IF UNDER 18) _____

PROVINCE: _____

I CERTIFY THAT I HAVE READ THE TERMS AND CONDITIONS SET FORTH ON THIS AGREEMENT AND LIABILITY RELEASE IN ITS ENTIRETY, AND THAT I HAVE EXECUTED THE SAME OF MY OWN FREE WILL WITHOUT ANY DURESS WHATSOEVER, REALIZING THAT IT IS A LEGALLY BINDING AGREEMENT.

SIGNATURE OF PLAYER: _____ DATE: _____

CONSENT OF PARENT OR GUARDIAN (REQUIRED FOR PARTICIPANT UNDER 18 YEARS OF AGE)
IN CONSIDERATION OF THE FACILITIES PROVIDED BY EAGLE BAY CAMP TO THE ABOVE PLAYER,
I, _____ (NAME OF PARENT/GUARDIAN) PARENT AND/OR GUARDIAN OF THE
PLAYER, MINOR, DO HEREBY AGREE BOTH ON BEHALF OF MYSELF AND SAID PLAYER AND HIS/HER AND MY HEIRS,
ASSIGNS AND LEGAL REPRESENTATIVES, TO ALL OF THE TERMS AND CONDITIONS SET FORTH IN THE ABOVE
AGREEMENT. I HAVE READ AND UNDERSTAND THE AGREEMENT. I UNDERSTAND THAT BY MAKING THIS AGREEMENT
I SURRENDER VALUABLE RIGHTS. I DO SO FREELY AND VOLUNTARILY.

SIGNATURE OF PARENT/GUARDIAN: _____ PHONE #: _____

INITIAL AFTER READING: I HEREBY CERTIFY:

_____ I AM AT LEAST 18 YEARS OF AGE AND IN GOOD MENTAL AND PHYSICAL HEALTH AND IF I AM UNDER THE
AGE OF 18, I WILL HAVE A PARENT'S OR GUARDIAN'S SIGNATURE GIVING PERMISSION TO PARTICIPATE IN THE GAME
AND AGREEMENT TO THIS WAIVER

IN RETURN FOR THE USE OF THE FACILITIES AND/OR ANY OTHER CONSIDERATION, I STATE AND AGREE
THAT:

A) _____ I AM AWARE THAT I AM PARTICIPATING IN AN ACTIVITY (HEREINAFTER REFERRED TO AS THE "ZIP LINE")
WHICH CAN BE PHYSICALLY AND MENTALLY STRENUOUS INVOLVING POSSIBLE RISK.

B) _____ I HEREBY UNDERTAKE AND ASSUME TOTAL RESPONSIBILITY FOR ANY RISK OR INJURY RESULTING IN THE
PARTICIPATION OF A ZIP LINE.

C) _____ I UNDERTAKE TO ZIP LINE ONLY IN ACCORDANCE WITH THE SAFETY INSTRUCTIONS, RULES AND GUIDELINES COMMUNICATED TO ME BY THE EAGLE BAY CAMP STAFF.

D) _____ I AM AWARE THAT EAGLE BAY CAMP STAFF CHECK THE CONDITIONS OR SAFETY OF EQUIPMENT REGULARLY AND IS IN COMPLIANCE WITH ALL SAFETY STANDARDS SET OUT FOR RUNNING A ZIP LINE COURSE.

E) _____ I HEREBY FOR MYSELF, HEIRS, EXECUTORS, ADMINISTRATORS, SUCCESSORS AND ASSIGNEES, RELEASE, REMISE AND FOREVER DISCHARGE FROM ANY CLAIMS AND LIABILITIES WHATSOEVER WITHOUT LIMITATIONS THAT I MIGHT HAVE AGAINST EAGLE BAY CAMP AND THE OWNERS OF THE PROPERTY UPON WHICH THE ACTIVITY OF ZIP LINE IS PLAYED FROM AND AGAINST ALL LIABILITY, ACTIONS, CLAIMS, COSTS, (INCLUDING LEGAL COSTS), DAMAGES, AND SUITS, ARISING OUT OF, CONNECTED WITH, OR RESULTING FROM MY PARTICIPATION IN A ZIP LINE WITHOUT LIMITATION, THOSE RESULTING FROM THE MANUFACTURE, SELECTION, DELIVERY, POSSESSION, USE, OR OPERATION OF SUCH EQUIPMENT. I HEREBY CERTIFY TO EAGLE BAY CAMP AND THE PROPERTY OWNERS THAT I AM IN GOOD HEALTH AND DO NOT SUFFER FROM A HEART CONDITION OR OTHER AILMENT THAT COULD BE AGGRAVATED BY THE EXERTION INVOLVED IN MY PARTICIPATION.

F) _____ I ACKNOWLEDGE THAT THE FOREGOING RELEASE IS INTENDED TO BE AS BROAD AND INCLUSIVE AS IS PERMITTED BY THE LAW OF THE PROVINCE OF BRITISH COLUMBIA, AND THAT IF ANY PORTION THEREOF IS HELD TO BE INVALID, THE BALANCE SHALL, NEVERTHELESS, CONTINUE IN FULL LEGAL FORCE AND EFFECT.

G) _____ I UNDERSTAND AND ACCEPT THE RESPONSIBILITY FOR ALL EQUIPMENT SUPPLIED TO ME BY EAGLE BAY CAMP. IF I DAMAGE OR LOSE ANY PORTION OF THIS EQUIPMENT, I AGREE TO PAY ALL COSTS RELATED TO THE REPLACEMENT OR REPAIR OF THE DAMAGED ITEM(S).

H) _____ I FURTHER DECLARE THAT THIS DOCUMENT HAS BEEN DRAWN UP IN THE ENGLISH LANGUAGE AT MY REQUEST.

I) _____ THIS AGREEMENT SHALL BE BINDING UPON ME, AS WELL AS MY HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS.

SEASONAL CONSENT: AT THE OPTION OF THE PARENT/GUARDIAN I AGREE TO THE WAIVER/CONSENT FORM BEING IN FORCE FOR THE CURRENT CALENDAR YEAR AND DO NOT REQUIRE ADDITIONAL CONSENT/WAIVER FORMS FOR EACH DATE THE PLAYER WISHES TO PARTICIPATE IN THE ACTIVITY OF ZIP LINE.

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: _____



PAINTBALL WAIVER

EAGLE BAY CAMP PAINTBALL ACTIVITY
RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTIONS OF RISKS AND INDEMNITY AGREEMENT
THIS IS A LEGAL DOCUMENT – READ CAREFULLY
BETWEEN EAGLE BAY CAMP AND:

PARTICIPANT (OR GUARDIAN IF UNDER 18)

NAME OF PLAYER: _____

PHONE #: _____

MAILING ADDRESS: CITY: _____

POSTAL CODE: _____

PARTICIPANT (OR GUARDIAN IF UNDER 18): _____

PROVINCE: _____

I CERTIFY THAT I HAVE READ THE TERMS AND CONDITIONS SET FORTH ON THIS AGREEMENT AND LIABILITY RELEASE IN ITS ENTIRETY, AND THAT I HAVE EXECUTED THE SAME OF MY OWN FREE WILL WITHOUT ANY DURESS WHATSOEVER, REALIZING THAT IT IS A LEGALLY BINDING AGREEMENT.

SIGNATURE OF PLAYER: _____ DATE: _____

CONSENT OF PARENT OR GUARDIAN
(REQUIRED FOR PLAYERS UNDER 18 YEARS OF AGE)

IN CONSIDERATION OF THE FACILITIES PROVIDED BY EAGLE BAY CAMP TO THE ABOVE
PLAYER,

I, _____ (NAME OF PARENT/GUARDIAN) PARENT AND/OR GUARDIAN OF THE
PLAYER, MINOR, DO HEREBY AGREE BOTH ON BEHALF OF MYSELF AND SAID PLAYER AND HIS/HER AND MY HEIRS,
ASSIGNS AND LEGAL REPRESENTATIVES, TO ALL OF THE TERMS AND CONDITIONS SET FORTH IN THE ABOVE
AGREEMENT. I HAVE READ AND UNDERSTAND THE AGREEMENT. I UNDERSTAND THAT BY MAKING THIS
AGREEMENT I SURRENDER VALUABLE RIGHTS. I DO SO FREELY AND VOLUNTARILY.

SIGNATURE OF PARENT/GUARDIAN: _____ PHONE #: _____

INITIAL AFTER READING:

I HEREBY CERTIFY:

I AM AT LEAST 18 YEARS OF AGE AND IN GOOD MENTAL AND PHYSICAL HEALTH AND IF I AM UNDER THE AGE OF 18, I WILL HAVE A PARENT'S OR GUARDIAN'S SIGNATURE GIVING PERMISSION TO PARTICIPATE IN THE GAME AND AGREEMENT TO THIS WAIVER

IN RETURN FOR THE USE OF THE FACILITIES AND/OR ANY OTHER CONSIDERATION, I STATE AND AGREE THAT:

A) _____ I AM AWARE THAT I AM PARTICIPATING IN AN ACTIVITY (HEREINAFTER REFERRED TO AS THE "PAINTBALL GAME") WHICH IS A PHYSICALLY AND MENTALLY STRENUOUS GAME INVOLVING POSSIBLE RISK OF INJURY FROM EQUIPMENT, OTHER PLAYERS, AND THE PLAYING ENVIRONMENT.

B) _____ I HEREBY UNDERTAKE AND ASSUME TOTAL RESPONSIBILITY FOR ANY RISK OR INJURY ASSOCIATED WITH PLAYING OR PARTICIPATION IN THE PAINTBALL GAME.

C) _____ I UNDERTAKE TO PLAY THE PAINTBALL GAME ONLY IN ACCORDANCE WITH THE SAFETY INSTRUCTIONS, RULES AND GUIDELINES WHICH I HEREBY ACKNOWLEDGE AS HAVING READ AND UNDERSTOOD.

D) _____ I AM AWARE THAT EAGLE BAY CAMP DOES NOT WARRANT THE CONDITION OR SAFETY OF EQUIPMENT, FACILITIES OR PREMISES, NATURAL AND CONSTRUCTED, OR THE AVAILABILITY OF EMERGENCY MEDICAL CARE, CONNECTED WITH THE PAINTBALL GAME.

E) _____ I HEREBY FOR MYSELF, HEIRS, EXECUTORS, ADMINISTRATORS, SUCCESSORS AND ASSIGNEES, RELEASE, REMISE AND FOREVER DISCHARGE FROM ANY CLAIMS AND LIABILITIES WHATSOEVER WITHOUT LIMITATIONS THAT I MIGHT HAVE AGAINST EAGLE BAY CAMP AND THE OWNERS OF THE PROPERTY UPON WHICH THE PAINTBALL GAME IS PLAYED FROM AND

AGAINST ALL LIABILITY, ACTIONS, CLAIMS, COSTS, (INCLUDING LEGAL COSTS), DAMAGES, AND SUITS, ARISING OUT OF, CONNECTED WITH, OR RESULTING FROM MY PLAYING THE PAINTBALL GAME, INCLUDING, WITHOUT LIMITATION, THOSE RESULTING FROM THE MANUFACTURE, SELECTION, DELIVERY, POSSESSION, USE, OR OPERATION OF SUCH EQUIPMENT. I HEREBY CERTIFY TO EAGLE BAY CAMP AND THE PROPERTY OWNERS THAT I AM IN GOOD HEALTH AND DO NOT SUFFER FROM A HEART CONDITION OR OTHER AILMENT THAT COULD BE AGGRAVATED BY THE EXERTION INVOLVED IN PLAYING THE GAME.

F) _____ I ACKNOWLEDGE THAT THE FOREGOING RELEASE IS INTENDED TO BE AS BROAD AND INCLUSIVE AS IS PERMITTED BY THE LAW OF THE PROVINCE OF BRITISH COLUMBIA, AND THAT IF ANY PORTION THEREOF IS HELD TO BE INVALID, THE BALANCE SHALL, NEVERTHELESS, CONTINUE IN FULL LEGAL FORCE AND EFFECT.

G) _____ I UNDERSTAND AND ACCEPT THE RESPONSIBILITY FOR ALL EQUIPMENT SUPPLIED TO ME BY EAGLE BAY CAMP. IF I DAMAGE OR LOSE ANY PORTION OF THIS EQUIPMENT, I AGREE TO PAY ALL COSTS RELATED TO THE REPLACEMENT OR REPAIR OF THE DAMAGED ITEM(S).

H) _____ I FURTHER DECLARE THAT THIS DOCUMENT HAS BEEN DRAWN UP IN THE ENGLISH LANGUAGE AT MY REQUEST.

I) _____ THIS AGREEMENT SHALL BE BINDING UPON ME, AS WELL AS MY HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS.

SEASONAL CONSENT: AT THE OPTION OF THE PARENT/GUARDIAN I AGREE TO THE WAIVER/CONSENT FORM BEING IN FORCE FOR THE CURRENT CALENDAR YEAR AND DO NOT REQUIRE ADDITIONAL CONSENT/WAIVER FORMS FOR EACH DATE THE PLAYER WISHES TO PLAY THE PAINTBALL GAME.

SIGNATURE OF PARENT/GUARDIAN: _____

DATE: _____



CLIMBING TOWER WAIVER

EAGLE BAY CAMP CLIMBING TOWER WAIVER AND RELEASE OF LIABILITY
IN CONSIDERATION OF BEING ALLOWED BY EAGLE BAY CAMP TO USE THEIR CLIMBING FACILITIES,
I HEREBY AGREE THAT:

1. THE RISK OF INJURY FROM THE ACTIVITIES INVOLVED IN THIS PROGRAM IS SIGNIFICANT, INCLUDING THE POTENTIAL FOR PERMANENT PARALYSIS AND DEATH, AND WHILE UNDER PARTICULAR RULES, EQUIPMENT, AND PERSONAL DISCIPLINE MAY REDUCE THIS RISK, THE RISK OF SERIOUS INJURY DOES EXIST.
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASES OR OTHERS, AND ASSUME FULL RESPONSIBILITY FOR MY PARTICIPATION
3. I WILLINGLY AGREE TO COMPLY WITH THE STATED AND CUSTOMARY TERMS AND CONDITIONS FOR PARTICIPATION. IF HOWEVER I OBSERVE ANY UNUSUAL HAZARD DURING MY PRESENCE OR PARTICIPATION, I WILL REMOVE MYSELF FROM PARTICIPATION AND BRING SUCH TO THE ATTENTION OF THE NEAREST STAFF MEMBER IMMEDIATELY.
4. I, FOR MYSELF AND ON BEHALF OF MY HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN, HEREBY RELEASE AND HOLD HARMLESS EAGLE BAY CAMP, THEIR OFFICERS, OFFICIALS, AGENTS, AND/OR EMPLOYEES, OTHER PARTICIPANTS, SPONSORING AGENCIES, SPONSORS, ADVERTISERS, AND, IF APPLICABLE, OWNERS AND LESSORS OF THE PREMISES USED TO CONDUCT THE EVENT ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSON OR PROPERTY, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

(PARTICIPANTS NAME) _____

DATE: _____

(PARTICIPANTS SIGNATURE) _____

DATE OF BIRTH: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

THIS IS TO CERTIFY THAT I, AS PARENT/GUARDIAN WITH LEGAL RESPONSIBILITY FOR THE PARTICIPANT, DO CONSENT AND AGREE TO HIS/HER RELEASE AS PROVIDED ABOVE OF ALL THE RELEASEES, AND, FOR MYSELF, MY HEIRS, ASSIGNS AND NEXT OF KIN, I RELEASE AND AGREE TO INDEMNIFY THE RELEASEES FROM ANY AND ALL LIABILITIES INCIDENT TO MY MINOR CHILD'S INVOLVEMENT OR PARTICIPATION IN THESE PROGRAMS AS PROVIDED ABOVE.

(PARENT/GUARDIAN'S NAME) _____

DATE: _____

(PARENT/GUARDIAN'S SIGNATURE) _____

PHONE #: _____

Chaperone Information Letter

Please review the following prior to your stay at camp:

- Chaperones are likely not able to participate in all skills. This includes skills that require equipment such as zip line, paintball, climbing, kayaking and archery. This is because we want to ensure all the students get to fully experience the skill. Please do not question our skill staff on this issue. They are there to facilitate an activity and need to concentrate on their task.
- We ask that at least one teacher and/or chaperone are seated at each table during meals. This helps with less mess making and helps lower noise levels.
- Under no circumstances, is there any smoking or drinking on camp property at any time. This includes the docks. We will have a designated area for smoking if needed.
- We will provide freezer space for ice packs. We appreciate your cooperation and we are looking forward to having you all out at Eagle Bay Camp. If you have any questions please contact our Camp Director, Ric Cyr or our Assistant Camp Director Chett Fichett.

Thank you, Eagle Bay Camp

School Group Retreats Schedule

Day # 1

11:30am Arrive
12:00pm Lunch (Bag lunch brought by group)
1:00pm **Skill Session # 1**
2:15pm **Skill Session # 2**
3:30pm **Skill Session # 3**
4:30pm Free Time – Waterfront open
5:15pm **Waterfront closed**
5:30pm Dinner
7:00pm **Wide Game # 1**
8:45pm Mug Up
9:00pm Campfire
10:00pm Get Ready for Bed
10:30pm Lights out

Day # 2

8:30am Breakfast
9:30am **Skill Session # 4**
10:45am **Skill Session # 5**
12:00pm **Lunch**
1:30pm **Skill Session # 6**
2:45pm **Skill Session # 7**
3:45pm Free Time - Waterfront open
5:15pm Waterfront Closed
5:30pm Dinner
7:00pm **Wide Game # 2**
8:45pm Mug Up
9:00pm Dance
10:15pm **“Mission Impossible Night Game”**
11:30pm Lights out

Day # 3

8:30am Breakfast
9:30am Clean up cabins/bathrooms
10:30pm **Leave for Home**

Skill Session we offer cannot be substituted: You will receive these 7 for your retreat.

- *Zip Lining
- *Kayaking
- *Blubb
- *Ga Ga Pit
- *Climbing Wall
- *Paintball
- *Archery

What to Bring

- Sleeping Bag
- Water bottle
- Jacket or sweater
- Pillow
- Clothes (mark your important items)
- Swimsuits
- Flashlight
- Towels and face cloth
- Medication
- Soap and shampoo
- Rain gear
- Toothbrush and toothpaste
- Good running shoes
- Sunscreen lotion
- Bug repellent
- A good attitude