

THIS YEAR'S THEME

GIRLZ EXPERIENCE
JUNE 8-10, 2018

Iroquois Springs Camp • Rock Hill

I planted the seed, Apollos watered it, but God has been making it grow. So neither the one who plants nor the one who waters is anything, but only God, who makes things grow. The one who plants and the one who waters have one purpose, and they will each be rewarded according to their own labor. For we are co-workers in God's service; you are God's field, God's building. 1 Corinthians 3:6-9 (NIV)



JUNE 8-10 2018

\$170.00 per person

STARS

3RD, 4TH & 5TH GR

(All 3rd Graders must be accompanied by parent)



TEEN GIRLS

6TH-12TH GR

RETREAT INCLUDES:

Theme T-shirt, Swimming, Team Games,
Talent Show, Karaoke, Crafts,
Sleeping in Cabins, Cabin Decoration Competition,
6 Meals -Breakfast, Lunch, Dinner,
Snack Bar, Evening Camp Service with special speakers
Camp Songs, Beach Ball Toss, Honor Graduation
Ceremony
New Friends and Fun!

REGISTRATION DEADLINE *Friday, May 4th*
With All Completed Forms

GIRLZ EXPERIENCE
JUNE 8-10, 2018

Iroquois Springs Camp • Rock Hill

I planted the seed, Apollos watered it, but God has been making it grow. So neither the one who plants nor the one who waters is anything, but only God, who makes things grow. The one who plants and the one who waters have one purpose, and they will each be rewarded according to their own labor. For we are co-workers in God's service; you are God's field, God's building. 1 Corinthians 3:6-9 (NIV)



WEEKEND SCHEDULE

Friday June 8

- 12-4pm: Registration
- 1pm: Swimming and Check in
- 2:30pm: Talent Tryouts
- 4:30 pm: Orientation
- 5:15pm/5:45pm: Dinner (split)
- 6:45pm/7:15pm: Evening Services (split)

Saturday June 9

- 7:15 am: Ceremony Practice
- 8:00am/8:30am: Breakfast (split)
- 9:45am: Ceremony
- 11:15am/11:45am: Lunch (split)
- 12:30pm-4:30pm: Activities, Sessions and FUN (prayer room for leaders)
- 4:30pm: Talent Show
- 5:45pm/6:15pm: Dinner (split)
- 6:45pm/7:15pm: Evening Services (split)

Sunday June 10

- 8:00am/8:30am: Breakfast (split)
- 9:30am: Closing Services

Girlz Experience FAQ's

- **Where will my daughter be staying for the weekend?** Girlz Experience is held at Iroquois Springs Camp in Rock Hill, a privately owned facility that NY Girls Ministries rents for the weekend. Groups are housed in cabins with twin sized cots. All cabins have showers and toilet facilities.
- **What will my daughter be doing?** Outdoor and indoor activities are planned for the weekend, including swim time, games, crafts and free time with her group. Every church group has the opportunity to participate in our Talent Show. Stars (grades 2-5) and Teen Girls (grades 6-12) will be following different schedules for most of the weekend, with activities, discussion sessions and camp services geared to their grade levels.
- **Why do I need to give medical authorization on the Camper Form?** The form allows our camp nurses, along with your church leaders, to supervise your daughter as she takes her medications that are ordered for her and sent by you as well as any "as needed" medications on the form that you have designated. We are also prepared with basic first aid supplies. Any emergency care will be obtained at local Emergency or Urgent Care Departments. Our staff will contact you in this *rare* instance and your church leaders will transport your daughter for emergency care unless 911 services are warranted.
- **Are meals included?** Iroquois Springs staff provides 6 meals in total including a bagged lunch for your child to take when she leaves on Sunday. If your child has food allergies or any other dietary concerns, please let your Church Coordinator know so she can note it on the Registration Form. We will request the appropriate meals for your daughter from the camp staff and her Church Coordinator will be instructed on obtaining those meals during scheduled meal times.
- **What can my daughter expect?** Our focus for the weekend is to draw girls into a deeper, more meaningful relationship with Jesus Christ, to empower them to live a life that glorifies Him and to develop relationships with other girls and women who can support them on their journey. The event's activities and services revolve around those goals.
- **What if I have other questions?** Please direct specific questions or concerns to your Church Coordinator, who can then contact NY Girls Ministries Staff if needed. You may also email Lisa Durant, NY Girls Ministries Director, at nygm.ld@gmail.com. Do not contact the staff at Iroquois Springs Camp.

Thank you for sending your child to Girlz Experience. Her safety and spiritual growth are our priority.

~Lisa Durant and the NY Girls Ministries Team

NYMINISTRYNETWORK
GIRLS



New York
girls
ministries
her heart ... her world ... His purpose

FACT SHEET: WHAT TO PACK

...ready? set? GO!

1. Dress, dressy outfit or Girls Ministries Uniform for Saturday Celebration
2. Change of clothes for Saturday and Sunday- shorts and jeans are fine **
3. Toiletries, washcloth, hand soap and towel
4. Sleeping bag and pillow- and a warm blanket (it gets chilly at night!)
5. Swimsuit and tshirt to wear to and from the pool over suit (leaders too!). **
6. Jacket or sweatshirt- again, it gets chilly at night!
7. Sneakers (you can also bring water shoes for the games)
8. Flashlight
9. Bible, notebook, pen or pencil
10. Pocket money for snack shop, T-shirts and jewelry
11. WARM pj's
12. Sunscreen
13. Bug spray
14. Camper Form (completed by your parent or guardian and notarized) and any authorized medications (IN ORIGINAL PACKAGING. that you will be taking at Girlz Experience
15. Decorations for your cabin. Be creative with the theme- this is a chance for your group to have fun!



DISTRIBUTE TO ALL
ATTENDEES AND PARENTS

**** Our dress code:**

DO wear tops with straps at least 1 inch wide and that cover your midriff (belly) area

DO wear shorts that are at least fingertip length (when arms are lowered to sides)

*DO wear swimsuits that are one piece OR (if two piece) cover your midriff (belly) area. Bring a tshirt to wear over your swimsuit to and from the pool***

FACT SHEET: WHAT TO EXPECT

...ready? set? GO

FOR EVERYONE

- DO keep your cabins tidy. Your group may be roomed with another church; please treat each other with respect and kindness and work together as a team
- DO be considerate and be ON TIME for all activities
- DO plan to "dress up" for our special Celebration Ceremony on Saturday morning
- DO cross the road ONLY where the crosswalk is designated
- DO leave radios, electronic devices, water guns and laser lights at home (Teen Girls may follow along with services via the YouVersion app)
- DO treat the property with respect by picking up trash and leaving the camp BETTER than we found it
- DO ask for permission before touching or using anyone else's belongings
- DO stay in all services until dismissal- if you have an emergency, see your leader immediately
- DO wear shoes when walking outside, especially to and from the pool

DISTRIBUTE TO ALL
ATTENDEES AND PARENTS

FOR LEADERSHIP/SPONSORS

- DO attend the mandatory orientation meeting on Friday afternoon in the Theatre and ALL GIRLS will attend their own meeting at the same time in the Arena
- DO make sure you know where your girls are at all times and do not allow them to go anywhere without direct supervision
- DO supervise your girls while crossing the road
- DO allow your girls to meet and make friends with other girls. Girls should not be fraternizing with the male staff members of Iroquois Springs Camp
- DO arrange to be responsible for no more than 6 girls
- DO plan to attend to any minor injuries/illnesses with your own first aid kit
- DO plan to park in the parking lot and transport your belongings to your cabin
- DO allow your girls to openly participate in all activities. We have some things planned for you too- don't miss out!
- DO visit nygmag.org for all necessary forms as the weekend gets closer

NYMINISTRYNETWORK
GIRLS



New York
girls
ministries
her heart ... her world ... His purpose

NY Girls Ministries Girlz Experience (June 8-10, 2018)

Camper Application

Please PRINT clearly. If you have any questions, please call 315-338-4646

This application must accompany a copy of camper's insurance ID card and Immunization record

GENERAL INFORMATION & EMERGENCY CONTACT:

First Name _____ Last Name _____ Date of Birth ____/____/_____

Address: _____ City: _____ State: _____ Zip: _____

Primary Phone for Household:(____) _____ Parent/Guardian Name: _____

Parent's Work Phone: (____) _____ Parent's Cell: (____) _____

Church Name: _____ Church City: _____

Emergency Contact Name: _____ Relationship to Camper: _____

Emergency Contact Home #: (____) _____ Work #: (____) _____ Cell Phone #: (____) _____

MEDICAL INFORMATION

Please list the dates the following immunizations were administered OR attach a copy of the camper's immunization record. Complete remaining health history below and on reverse side

Dtp series dates: _____ OPV/IPV series dates: _____

MMR#1: _____ MMR #2: _____ HIB series dates: _____ Tdap: _____

Hep B#1: _____ Hep B #2: _____ Hep B #3: _____ Varicella #1: _____ Varicella # 2: (or date of disease) _____

We have chosen NOT to immunize our child: _____ (Parent or Legal Guardian Signature)

PRESCRIPTION MEDICATIONS:

*For the safety of all campers, **all** medications **MUST** be in original container, clearly labeled and turned into Camp Nurse upon your arrival at camp with this form. Medications will be self administered by the child, under the supervision of the Camp Nurse and accompanying Girls Ministries Leader (insulin and inhalers will be kept with campers)*

List **all** prescription medication and dosage that your child will bring to camp:

List any/all camper present medical conditions: _____

List any/all camper allergies (including medication allergies): _____

List any camper restrictions: _____

List any camper special needs or additional significant information: _____

OVER THE COUNTER MEDICATIONS:

I hereby give permission to the Camp Nurse to administer any of the following over the counter medications to my child as needed, in the dosage appropriate based on my child's age and size:

- Ibuprofen
- Acetaminophen
- Pepto-Bismol
- Antacid (Tums, Rolaids)
- Imodium AD
- Cough Drops
- Benadryl
- Basic wound care (cleansing with soap and water, antiseptic, applying antibiotic ointment)

Parent/Legal Guardian Signature _____

CAMPER INSURANCE AND PROVIDER INFORMATION: Please attach a copy of camper's Insurance Card:

Primary Care Provider's Name: _____ PCP Ph: (____) _____

Insurance Provider: _____ PH: (____) _____

Subscriber's Name: _____ ID #: _____

(If camper does not have insurance coverage, please list above as "none.")

PARENTAL CONSENT & MEDICAL AUTHORIZATION: (In this section the Parent/Guardian Signature must be in the presence of the Notary Public)

I, the undersigned, being the parent or legal guardian of the camper named, do hereby consent to the camper's assignment on and participation in Girlz Experience (June 8- 10, 2018) sponsored by the NY Girls Ministries Department of the NY Ministry Network at Iroquois Springs Camp in Rock Hill, NY, including, but not limited to, all activities customarily associated with Girlz Experience. I am aware of the hazards and risks associated with such a trip including, but not limited to, death or injury by accident, disease, weather conditions, criminal activity, camp recreational activity and random acts of violence. I/we hereby release the NY Ministry Network, its agents, assigns, employees and volunteer assistants from any liability whatsoever arising out of injury, sickness or damage which may be sustained by said camper during course of said camp.

This health history noted for my child is correct as far as I know. It is understood that the NY Girls Ministries Department or any person(s) or agency acting as the agent of the NY Girls Ministries Department will contact the parent/legal guardian immediately to inform them of the child's condition and of all emergency, unexpected medical, dental, health or hospital services. If it is possible and will not cause any deterioration or worsening of undue risk or pain to my child, all surgical proceedings shall be at notice to me. I also understand and agree that if it is necessary for my child to leave this event due to health or injury issues, I am responsible to provide safe transportation for my child to return home.

I understand that while the above named camper participates in any Girlz Experience activity, she is responsible to abide by any rules set forth by the NY Ministry Network and to comply with all orders and directives of Girlz Experience supervisory personnel. Any infraction of the rules by the camper can result in dismissal from the program. In the event the camper is dismissed from the program, I, the undersigned, agree to assume the responsibility of picking the camper up from the program and/or the cost of returning the camper to her home. I also agree to forfeit any right to a refund of any pre-paid fees or expenses. I understand that such action would only be taken after notification of the camper's Girls Ministries Leader and parent/guardian. In addition, I authorize NY Girls Ministries to take/use photographs of my child individually or in groups and/or multimedia images and recordings for the purpose of creating a Camp DVD/Video and for NY Girls Ministries promotional use. I will make no monetary or other claims against the NY Girls Ministries Department for the use of such photos or videos.

Parent/Legal Guardian Signature: _____ Date: _____

(THE SIGNATURE ABOVE MUST BE IN THE PRESENCE OF A NOTARY PUBLIC)

MUST BE COMPLETED BY NOTARY PUBLIC

STATE OF _____)

COUNTY OF _____)

On this _____ day of _____, 20____, before me, _____, a Notary Public in and for said state personally appeared _____, known to me to be the person (s) who executed the within agreement and acknowledged to me that he/she /they executed the same for the purposes therein stated.

My Commission expires on _____ Notary Stamp Here:

Signature: _____



NYMINISTRYNETWORK
GIRLS



SWIM TEST WAIVER

Girlz Experience 2018 (Please bring to Registration Area)

I, _____, Parent/Guardian of _____,
acknowledge that my daughter can swim in deep water. I will not hold the camp responsible
for any unforeseeable accidents that may occur while she is swimming in the pool or the
lake.

Parent/Legal Guardian Signature: _____
Date: _____ (THE SIGNATURE ABOVE MUST BE IN THE

PRESENCE OF A NOTARY PUBLIC)

MUST BE COMPLETED BY NOTARY PUBLIC

STATE OF _____)

COUNTY OF _____)

On this _____ day of _____, 20____, before me, _____, a Notary
Public in and for said state personally appeared _____, known to me to be the
person (s) who executed the within agreement and acknowledged to me that he/she /they executed the same for the
purposes therein stated.

My Commission expires on _____ Notary Stamp Here:

Signature: _____

T-SHIRT CHOICE
\$14.00 EACH

G500B GILDAN YOUTH 5.3 OZ. T-SHIRT

Product Specifications

	XS	S	M	L	XL	-	-	-	-	-
BODY WIDTH	16	17	18	19	20	-	-	-	-	-
FULL BODY LENGTH	20.5	22	23.5	25	26.5	-	-	-	-	-
SLEEVE LENGTH	13.5	14.5	15.5	16.5	17.5	-	-	-	-	-

How to Measure

BODY WIDTH: Lay garment flat. 1" below the armhole flat measure the garment across the chest.

FULL BODY LENGTH: Lay garment flat(face down). Measure from center back neckline seam straight down to back bottom hem.

SLEEVE LENGTH: Lay garment flat(face down). Measure from center back neck to outer edge of shoulder seam, then along outer edge to sleeve end.