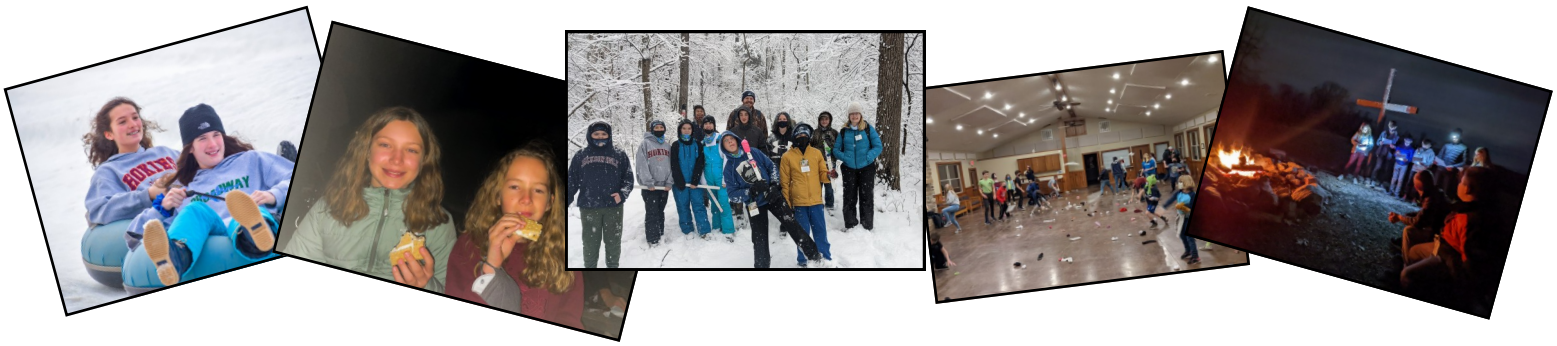

# WINTER CAMP 2027

**3rd-7th Grade: Jan. 8th @ 6pm - Jan. 10th @ 2pm**

**7th-12th Grade: Feb. 12 @ 6pm - Feb. 14th @ 2pm**

Brethren Woods
camp and retreat center

Join us for 3 days and 2 nights of winter fun, friends, and faith at our Winter Camp! Experience all the best parts of summer camp with a winter twist—think snow tubing, hot chocolate, and a cozy movie night under the stars! Our days will be packed with classic camp activities like vespers, Bible study, crafts, games, and more. Plus, you'll enjoy great food and warm fellowship with friends, new and old!

Campers stay in our heated cabins and retreat facilities, fully supervised by our trained staff for a safe and memorable experience. The cost is $200, which includes 2 nights of lodging, 5 meals, snacks, snow tubing tickets(for the younger) or ice skating(for the older), all activities, a group photo, and a special camp swag item to remember your winter adventure!

## BRETHREN WOODS' 2027 WINTER CAMP REGISTRATION FORM

**To register, visit our website at www.brethrenwoods.org/wintercamp or send this completed form and $185 registration fee to Brethren Woods at 4896 Armentrout Path, Keezletown, VA 22832. Registrations are due by Jan. 4th or Feb. 1st.**

**First Name:** _____ **Middle Initial:** _____ **Last Name:** _____

**Address:** _____ **Home Phone Number:** (____)_____

*Street and Number* *City* *State* *Zip Code*

**Home Church:** _____ **Church Support Contribution Amount:** _____

**Current Grade:** _____ **Date of Birth:** _____ **Age:** _____

**Sex: M F** **Height:** _____ **Weight:** _____ **Cabin-Mate Request:** _____

**Parents/Guardians:** _____ _____ _____

*Name* *Phone Number* *E-mail Address*

**Emergency Contact:** _____ _____ _____

*Name* *Relationship* *Phone Number*

*Which Winter Camp is the camper signing up for: __ January 8-10 (3rd-7th Grade) __ February 12-14 (8th-12th Grade)*

**Information that May Be Helpful to the Camp Staff and Your Child's Counselors (hobbies or special interests, fears, bedwetting, homesickness, life situations, concerns, behavioral/medical/emotional/dietary special needs, etc.)** _____

_____

_____

**Permission and Authorization:** I certify that the camper registering is in good health and may participate in the activities for Winter Camp. I authorize the officials of Brethren Woods to act in an emergency and give permission to the physician selected by Brethren Woods to hospitalize, secure proper treatment, and/or order injection, anesthesia, or surgery for the camper named on this form. I will abide by the camp's decision should it be necessary to send the camper home for any reason, including illness and behavior. I give Brethren Woods and partner organizations permission to use photos and video recording of the camper for publicity purposes. I agree that the camper will abide by all regulations for personal conduct and the use of camp property, will participate fully in the camp program, and will accept the camp's decision regarding area assignments.

_____ _____ _____ _____

Camper's Signature Date Parent/Guardian Signature Date