

# 2023 Youth Camp Schedule

## THURSDAY - July 13

6:00 pm - Registration  
7:00 pm - Supper  
7:30 pm - Gathering & Introductions  
8:00 - 8:45 pm - Worship at Tabernacle  
9:30 - 11:00 pm - Evening Activities  
11:15 pm - Lights out!

## FRIDAY - SUNDAY - July 14 - 16

7:30 am - Rise and Shine  
8:00 - 8:45 am - Breakfast  
9:00 am - Prepare for Daily Activities  
10:00 am - 4:15 pm  
    Daily Activities  
    Service Projects  
4:30 - 5:00 pm - Games & Recreation  
5:00 - 6:00 pm - Wash/Clean up for supper  
6:00 - 7:00 pm - Supper  
7:00 - 7:20 pm - Restroom, get Bibles, etc.  
7:30 - 8:45 pm - Worship at Tabernacle  
9:00 pm - Prepare for Evening Activities  
9:15 - 10:15 pm - Snack, skits, games, etc.  
10:15 - 10:45 pm - Free Time  
11:00 pm - Lights out!

**ALL** Youth will go home on  
    Sunday, July 16  
following the Sunday Morning  
    worship service  
(Check Out will begin about 12:15 pm)

*Schedule is subject to change due to weather and  
unforeseen interruptions*

Youth Camp Contact:  
Rev. Chance S. Ward  
Goshen United Methodist Church  
826-6088 (Office)  
667-4903 (Cell)  
rev.chance.ward@gmail.com

Please mail Registration Form  
for Youth Camp to:

Goshen UMC  
c/o Rev. Chance S. Ward  
107 Goshen Road  
Rincon, Georgia 31326

Make Checks Payable to:  
Effingham County  
Methodist Campground

Cost for Youth Camp  
\$55

# 2023 Youth Camp

Effingham County  
Methodist Campground

# July 13 - 16, 2023

*My Story,  
Your Glory!*

LUKE 8:38-39

# PACKING LIST

## CLOTHING

T-Shirts  
Shorts  
Underclothes  
Socks  
Hat  
Swimsuit  
Raincoat  
Pajamas  
Towels  
Flip Flops  
Sunglasses

## BEDDING

Sheets (for a double bed)  
Pillow  
Blanket  
Sleeping Bag

## TOILITERIES

Soap  
Shampoo  
Toothbrush/Toothpaste  
Comb/Brush  
Towel/Washcloth  
Deodorant  
Shower shoes

## MISCELLANEOUS

Bible/Notebook/Pen  
Sunscreen  
Insect Repellant  
Flashlight  
Copy of Insurance Card  
Medicine needed

GREAT ATTITUDE!

# 2023 Youth Camp



Please Select:

Youth Camp (7/13 - 7/16)

Participant

Adult Volunteer

Adult Sizes ONLY

Participant's Name \_\_\_\_\_ T-Shirt Size \_\_\_\_\_

Address \_\_\_\_\_

Father's Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Phone Number: Home \_\_\_\_\_

### Age Information

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Last Grade Completed \_\_\_\_\_

School \_\_\_\_\_ Home Church \_\_\_\_\_

### Allergies / Medical Information / Other

\_\_\_\_\_  
\_\_\_\_\_

### Special Dietary Requirements

\_\_\_\_\_  
\_\_\_\_\_

Insurance Co. \_\_\_\_\_

Policy/Group # \_\_\_\_\_

In the event of an accident and I am unable to be reached, I grant permission to an adult staff member to seek and/or obtain medical assistance that may be necessary.

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

### Emergency Contacts

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_