

KidQuake

2019

REGISTRATION PACKET

When: KQ 1 – March 29-31 at Camp Glen Lake
KQ 2 - April 5-7 at Camp Gilmont in East Texas
KQ 3 - April 26-28 at Camp Gilmont in East Texas

Who: 1st –5th Graders and their sponsors.
(6th Graders invited only if your church does not send them to YouthQuake)

Sponsored by: KidQuake Task Group of Grace Presbytery

Cost: \$125 - includes 4 meals, housing, programming, T-shirt.

Leadership: Coordinated by Miatta Wilson and a team of Educators. Austin College Activators, PULSE, Grace Young Adults, and Camp Counselors lead onsite.

What to do: Read this registration packet and register ONLINE at www.gracepresbytery.org/kidquake .

Registration Opens: February 13th, 2019

“Space is limited so register early”

NOTE: West Kidquake Event particularly targets churches in the western and southern part of the Presbytery who were serviced by Prairie Valley Camp. Also – All Kidquakes are benefiting from PV Legacy Funds.

KidQuake Information

WHAT - KidQuake is in its 21st year and is sponsored by the Kidquake Task Group of the Congregational Support Committee of Grace Presbytery to give children another opportunity to be at camp other than the summer. These weekends will be a combination of summer camp and YouthQuake style.

This year we have three weekends. This includes a WEST event at Glen Lake Camp particularly for churches in the western or southern part of Grace Presbytery who were serviced by Prairie Valley Camp.

All Kidquakes are benefiting from Prairie Valley Legacy Funds this year which help offset the expenses for our volunteer leadership folks, program supplies. This also helps us from having to raise the cost. We also have additional scholarship funds available for any child who wants to attend Kidquake.

Churches must send sponsors with children and children must come and register with a church. However, the sponsors will not be responsible for programming at the event, but concentrate on participation and supervising their group. Past and future summer camp counselors will provide the programming along with Austin College Activators, PULSE and other Presbytery leaders. Miatta Wilson and a team of Educators will plan the event.

WHO - This event is for children in 1st – 5th Grade. 6th Grade children are welcome **ONLY** if your church does not send 6th graders to YouthQuake and 6th grade is part of elementary school for your Church School.

COST - The event cost is \$125 per person. **(CHILD AND SPONSOR)**

SCHOLARSHIP ASSISTANCE – Scholarship assistance, generally one-third the cost of the event, is available to children, who have financial concerns. Scholarship forms are available for download on the website, from registrar@gracepresbytery.org and a form is included here. ***Scholarship Application Deadline is March 22rd***. Completed scholarship forms and questions are to be directed to Amy Parker at FPC Ft. Worth aparker@fpcfw.org.

THEME INFORMATION – For 2019 our theme is “Hear, Help, Head on Out” focusing on the Parable of the Sower, Healing of the Blind man, and Jesus saying Follow me. We will also have a group mission project along with small group, and typical camp activities.

SPONSOR INFORMATION –Sponsors for this event must be at least 21 years old. And each church **MUST** send 1 sponsor of the same sex for each group of 6 boys or 6 girls or a portion thereof. *Example: If one church sends 8 girls and only 1 boy, then 2 women and 1 man must come as sponsors for the group.* You are welcome to share sponsors with another church if that is made clear on the registration information to the Registrar. We need to know this for housing and supervision purposes. If you need ideas of churches to share sponsors, please call the Registrar at the Presbytery office.

SPONSORS' RESPONSIBILITY AND BACKGROUND CHECKS – Background checks are required by Grace Presbytery, our insurance carriers, and the camp site. The *Grace Presbytery Acknowledgement of Child Abuse Prevention and Leadership Screening Program Sheet* must also be completed and returned to the registrar well in advance of the event. In

addition, every adult attending must read and sign the Sponsor Covenant. Sponsors must be present for the whole weekend and are responsible for supervising their children.

BEGINNINGS AND ENDINGS – Kidquakes begin on Friday at 8:00pm and conclude before noon on Sunday. Three meals are provided on Saturday and breakfast on Sunday. Schedules are always subject to the weather.

EMERGENCY CONTACTS AND SITE INFORMATION -

Gilmont Program Center
6075 SH 144N, Gilmer Texas 75644
903-797-6400

Directions can be found at www.gilmont.org

The camp is located about five miles northeast of Gilmer on Texas Hwy (SH) 155

Glen Lake Camp and Retreat Center
1102 NE Barnard St.
Glen Rose Texas 76043
254-897-2247

Directions can be found at www.glenlake.org

The camp is just off of HWY 144S near Glen Rose.

SPONSORS BRING TO CAMP –

¹COMPLETED EMERGENCY MEDICAL FORMS (Adult and Child) ****New - You may use your own church emergency medical form OR the Grace Presbytery Form.*

²GENERAL RELEASE FORM

³COMPLETED COVENANT OF CONDUCT FOR EACH CHILD AND ADULT SPONSOR.

⁴GILMONT ASSUMPTION OF RISK (if Camp Gilmont)

These will be turned in at registration and camp arrival. Sponsors will then hold on to the emergency forms. It is important for you to have these on the drive to and from camp. **DO NOT SEND THESE FORMS TO PRESBYTERY WITH YOUR REGISTRATION!**

QUESTIONS—Contact the Kidquake Registrar at registrar@gracepresbyery.org or 214-630-4502.

REGISTRATION INFORMATION

REGISTRATION OPENS ONLINE ON FEBRUARY 13, 2019

Important Things to know about Registration

- 1) Adult sponsors and children must register as a group.
- 2) *Registration is conducted on a "first-come, first-served" basis.* When a camp is filled, remaining registration will be placed on a Waiting List, unless a Group chooses an alternate date. Each camp weekend has approximately 140 spots available with Glen Lake a bit fewer.
- 3) All registrations will be made online at www.gracepresbytery.org/kidquake through the Presbyterian Registration system.
- 4) In registering, the person registering the group (Church Registrar) will provide names of the youth and adults attending along with their personal contact information, t-shirt size, grade/age and dietary restrictions.
 - a) On the closing date for the particular event (two weeks before the event begins), all spaces registered become non-refundable. Prior to this date, a \$20 non-refundable fee will be kept for any canceled spots.
 - b) Any additions, substitutions, or cancellations can be made online until registration closes (two weeks before the event begins) After registration closes, any additions or substitutions need to be emailed to registrar@gracepresbytery.org and cleared BEFORE attending the event.
 - c) CLOSING Registration Dates are:
KQ -1 (March 29-31) – March 15
KQ -2 (April 5-7) – March 22
KQ -3 (April 26-28) – April 12
- 5) The person registering the group for the event (Church Registrar) will use their email address as the contact email address for **EVERY** person they register.
- 6) As groups are registered, the designated Church Registrar will receive a preliminary confirmation email of their groups registration.
- 7) After **FULL** payment has been received, a final confirmation email will be sent.
- 8) Your Group's registration cannot be finalized until the background checks are completed and the *Acknowledgement Form* returned to the registrar.

How to Register

- 1) All registrations will be made on line at www.gracepresbytery.org/kidquake . You will find a button which sends you to the registration site.
- 2) Payment can be made by check or online by credit card.
- 3) Mail a check payable to: c/o Kidquake Registrar
Grace Presbytery
6100 Colwell Blvd. Suite 100
Irving Texas 75039
- 4) You will receive a Confirmation email, with a Confirmation Letter, a reminder of the appropriate forms to bring to camp and other needed information. **The Confirmation Letter must be brought to camp in order for the group to check in at the event.**

Grace Presbytery General Release Form



I, _____, will be participating in a Grace Presbytery Children's or Youth

PARTICIPANT'S NAME (PLEASE PRINT)

Event called _____ at _____
Name Place
on _____
Date

I (We), the undersigned, individually and/or as parents/guardians of the above named participant acknowledge that the above named young person will be participating in this event and it's related activities and using facilities of the sponsoring and hosting institution/camp at the participants own risk. I (We) on my/our own behalf, hereby release, discharge and indemnify Grace Presbytery of Irving, Texas, it's directors, officers, employees, physicians, agents and all volunteer personnel as well as the hosting institution/camp from all liabilities for damage, injury, or illness to the above named participant or his/her property during his/her participation in or travel to or from this Grace Presbytery event.

Parent or Guardian's Signature _____ Date _____

PERMISSION TO USE LIKENESS

I, _____ (parent/guardian), do hereby give my permission for my dependent child's likeness and/or photograph to be used for informational and promotional purposes (print, video, multimedia, and internet) for Grace Presbytery of Irving Texas and the hosting institutions/camp.

Grace Presbytery and hosting institutions agree to make every effort to protect the privacy and dignity of your children. We will never include biographical information in connection with your child's picture/likeness. (Full name, address, e-mail address, etc.) Additionally, if you or your dependent request that a picture be removed, it will be done so immediately. In the case of an internet picture, this will be done as soon as possible. In the case of a printed picture, this will be done the next time it goes to print.

Name of Youth _____

Parent or Guardian's Signature _____ Date _____

GRACE PRESBYTERY
YOUTH/CHILD EMERGENCY INFORMATION CONSENT FORM
(NOTE: IF YOUR CONGREGATION HAS AN EMERGENCY HEALTH FORM, IT CAN BE SUBSTITUTED)

Name of Participant: _____ Sex: ____ Age: ____ Date of Birth: _____

Address: _____ Home Phone: _____

City: _____ State: _____ Zip Code: _____ Cell Phone: _____

IN CASE OF EMERGENCY CALL:

Name: _____ Relationship _____ Home Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____ Cell Phone: _____

ALTERNATE CONTACT:

Name: _____ Relationship _____ Home Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____ Cell Phone: _____

MEDICAL INFORMATION: Please list all allergies: (This includes all Medications, Foods, Insect Bites, Asthma, etc.)

CARRY EPI PEN/INHALER? ____ YES ____ NO

**Note of medical necessity from Dr, stating child may keep this medicine/device in his/her possession. Please include note with this form.*

Please list any medications this child is presently taking:

**Prescription medicine must be in original labeled container. Minors may not self-administer meds, except if needed for life threatening conditions (e.g. EPI Pen/Inhaler).*

Please list all health restrictions, pre-existing or present medical conditions:

Family Doctor: _____ Phone: _____

Name of Insurance Company: _____ Phone: _____

Policy Number: _____ Date of Last Tetanus Shot: _____

My child does not (I do not) currently have health insurance.

I/We understand that in the event medical intervention is needed, every attempt will be made to contact immediately the persons listed on this form. In the event I/we cannot be reached or the alternate contact person cannot be reached in an emergency I/we hereby give my/our permission to the physician selected by the activity leader to order emergency transportation, hospitalize, to secure medical treatment and/or to order an injection, anesthesia, or surgery for my child as deemed necessary.

I/We understand that all safety precautions will be taken at all times by Grace Presbytery and its ministry partners during all events and activities. I/We understand the possibility of unforeseen hazards and know the inherent possibility of risk. I/We agree not to hold Grace Presbytery, their leaders, employees, and/or volunteer staff liable for damages, losses, diseases, or injuries incurred by said child. Furthermore, I/We hereby assume all risk of personal injury, sickness, death, damage, and expense as a result of participation in recreation and work activities involved therein.

I/We understand that my insurance coverage for my/our child will be used as primary coverage in the event medical intervention is needed. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action, or otherwise, I/We hereby assume all transportation costs.

PARENT OR GUARDIAN'S SIGNATURE _____ **Date** _____

GRACE PRESBYTERY
ADULT EMERGENCY INFORMATION CONSENT FORM
(NOTE: IF YOUR CONGREGATION HAS AN EMERGENCY HEALTH FORM, IT CAN BE SUBSTITUTED)

Name of Sponsor: _____ Sex: ____ Age: ____ Date of Birth: _____
Address: _____ Home Phone: _____
City: _____ State: _____ Zip Code: _____ Cell Phone: _____

IN CASE OF EMERGENCY CALL:

Name: _____ Home Phone: _____ Cell Phone: _____
Home Address: _____ City: _____ State: _____ Zip: _____

NAME OF FRIEND OR RELATIVE, IF ABOVE CAN NOT BE REACHED:

Name: _____ Home Phone: _____ Cell Phone: _____
Home Address: _____ City: _____ State: _____ Zip: _____

MEDICAL INFORMATION:

Please list all allergies: (This includes all Medications, Foods, Insect Bites, Asthma, etc.) CARRY EPI PEN? ____ YES __ NO

Please list any medications you are currently taking:

Please list all health restrictions, pre-existing or present medical conditions:

Family Doctor: _____ Phone: _____

Name of Insurance Company: _____ Phone: _____

Policy Number: _____ Date of Last Tetanus Shot: _____

In case of injury or illness and you are unable to respond, do you grant the power of attorney to the group supervisor to complete and sign the necessary documents or admission and/or treatment consent forms required by the attending physician or hospital?

Signature: _____ Date: _____

Child Covenant of Community

Grace Presbytery Kid Quake

*Please read carefully with your parent or guardian before signing.
Please return this form to your sponsor and make sure it is brought to camp with your health form.*

- 1) I understand I am expected to participate fully in the activities of the weekend.
- 2) I understand campers, sponsors, and all leadership are expected to wear seat belts when traveling to and from camp.
- 3) I understand I must respect and follow the instructions of sponsors and staff members.
- 4) I understand the staff has established curfews in order to insure adequate rest and safety. Campers and sponsors are expected to follow these.
- 5) I understand I may not have electronic devices including cell phone, tablet, MP3 player etc. We are here to enjoy each other and God's creation for the weekend.
- 6) I understand the cost of repair for any destruction of property by a camper will be the responsibility of the parent.
- 7) I understand illegal drugs, alcoholic beverages, firearms, tobacco products, or fireworks are not permitted.
- 8) I understand inappropriate behavior between campers, or staff/sponsors and campers is not permitted.
- 9) I understand that practical jokes, inappropriate language and other behaviors which do not build up the body of Christ are not permitted. This includes water balloons, silly string, shaving cream, water guns, and more, some of which can hurt the environment, birds and animals, as well as people.
- 10) I understand that no sexually suggestive clothing or clothing depicting alcohol or tobacco may be worn.
- 11) I understand flip flops and sandals are a safety hazard and should not be worn.
- 12) I understand that in the event I am dismissed for unbecoming conduct, the director will notify my parents or guardian to pick up me up at our expense.
- 13) I understand that campers and sponsors may not have food or drinks in cabins since it attracts critters.

As a person desiring to be a follower of Jesus Christ and His teachings, by signing this form I agree to follow the above. In addition, I agree to work on the following attitudes: ***respect for others and self, responsibility for personal actions, openness in mind and heart to learning and the leading of the Holy Spirit.***

Camper's Signature

Date

Parent or Guardian's Signature

Date

Covenant of Community

Grace Presbytery Kid Quake - Adult Sponsor

Please read carefully sign and bring to camp with your Emergency Form and all the forms of your campers.

- 1) I will participate as fully as I am able in the entire event, with a full and positive frame of mind. I understand that I will be expected to participate in small groups. I will serve as an adult presence for the weekend with all children.
- 2) I will support the rules set by the leadership team, and make sure that all children follow the rules. I will enforce curfew and lights out.
- 3) I understand that campers and sponsors may not have electronic devices including Cell phones, mp3 players etc. We are here to each other and enjoy God's creation. Cell phones can be used in emergencies by adults.
- 4) I understand that the cost of repair for any destruction of property by a camper will be the responsibility of the parent or guardian and I will report damages to the leadership.
- 5) I understand that illegal drugs, alcoholic beverages, firearms, tobacco products, or fireworks are not permitted.
- 6) I understand that practical jokes, inappropriate language and other behaviors which do not build up the body of Christ are not permitted. This includes water balloons, silly string, shaving cream, water guns, and more, some of which can hurt the environment, birds and animals, as well as people.
- 7) I understand that no sexually suggestive clothing or clothing depicting alcohol or tobacco may be worn by youth, children or adults during a church activity. If someone is wearing prohibited clothing I will ask that person to change. I understand flip flops and sandals are a safety hazard.
- 8) I understand that inappropriate behavior between campers, or staff/sponsors and campers is not permitted.
- 9) I understand that individuals who violate this Covenant of Community will be sent home at the expense of their parents. Adults breaking the Covenant may be asked to leave camp, and/or may be asked not to return.
- 10) I understand that I am expected to make sure that seat belts are worn by both adults and children traveling to and from Kidquake.
- 11) I understand that I am expected to stay on camp property for the whole retreat.
- 12) I affirm that I have been screened and approved as required by our church and Grace Presbytery's Child Protection Policy.

As a person desiring to be a follower of Jesus Christ and His teachings, by signing this form I agree to follow to the above. In addition, I agree to work on the following attitudes: *respect for others and self, responsibility for personal actions, openness in mind and heart to learning and the leading of the Holy Spirit.*

Sponsor Signature

Date



**Assumption of Risk and
Release Affidavit:
Texas Department of Health, ACA
Health/Wellness Standards**

With my signature below, I certify that I have been informed and made aware that during my/my child's participation in Kid Quake/Youthquake at Presbyterian Camps of Gilmont, certain risks and dangers may occur. These risks include, but are not limited to: hazards that arise from being in a wilderness area, the forces of nature, and participation in activities near or in water and/or other camp activities, arranged by the camp or the group leader. To allow participation in the activities organized and conducted, Camp Gilmont wishes to make known there is inherent risk in camp activities. These activities include but are not limited to: canoeing, hiking, group athletic events.

*The signature on this document shall serve as **permission for participation, and the release and assumption of risk.** In consideration of my willingness to engage/allow my child to engage in camp activities, I, the undersigned assume ordinary risks involved due to the nature of the activities and do hereby hold Presbyterian Camps at Gilmont, Inc., also known as Camp Gilmont, its officers, directors, agents, employees and volunteers, harmless from any and all claims, liabilities, suits, actions, causes, damages or losses and demands of every kind and nature whatsoever, including without limitation, all costs and attorneys fees, which may arise from emotional or physical injury, including fatality, from or in connection with my/my child's stay, or participation in activities at Camp Gilmont. The terms hereby shall serve as a release and assumption of risk for me, my heirs, executors, administrators and for all members of my/my child's family.*

In case of accident or illness, the cost of medical care is the financial responsibility of the ill or injured person or parent or legal guardian. I have listed on the Permission to Treat Form for Minors or the Health and Emergency Information Form for Adults, any medical condition that Camp Gilmont should be aware of which may hinder my/my child's participation in the program(s). However, I understand that it is solely my responsibility to determine whether there is any medical reason that I/my child should not participate in the program(s). I also state that I am not under, and will not be under, the influence of any chemical substance, including alcohol. Further, I understand that I am responsible for cost incurred for transportation home in the event of illness, discipline problem, or failure to adhere to camp procedures.

PHOTO/VIDEO OPT OUT:

_____ **Initial here if you DO NOT** permit Gilmont and Grace Presbytery to use photographs/videos including you/your child in publicity for promotion and presentation purposes. (Gilmont staff will not use names in publicity).

Print Full Name of Participant
Date

Signature / Parent Guardian Signature

GRACE PRESBYTERY
Acknowledgment
of Child Abuse Prevention and Leadership Screening Program
2019-2020

NAME OF CHURCH: _____

City: _____

The undersigned representatives of the above-named church hereby acknowledge that this church (check one)

maintains its own written policy

has adopted the presbytery's policy to help prevent the abuse of children

and youth.

All of the individuals listed on this form are currently members of this congregation and have been screened including a security background check conducted in accordance with church and/or presbytery guidelines. These individuals have been authorized to work with the children and youth of this church.

Date _____, 2019

Signature _____ Signature _____

Printed Name _____ Printed Name _____

Capacity with Church _____ Capacity with Church _____

Background Checks have been conducted through (Name of Organization):

1. _____ 12. _____

2. _____ 13. _____

3. _____ 14. _____

4. _____ 15. _____

5. _____ 16. _____

6. _____ 17. _____

7. _____ 18. _____

8. _____ 19. _____

9. _____ 20. _____

10. _____ 21. _____

11. _____ 22. _____

Kidquake Camper and Parent Information

1) Complete and return all the forms that are required by this event and your church to your church staff member or sponsor:

- a.) Your Church Medical/Emergency Form OR Grace Presbytery Medical/Emergency Form
- b.) Grace Presbytery General Release Form
- c.) Grace Presbytery Kidquake Covenant of Conduct
- d.) Gilmont Assumption of Risk (if going to Camp Gilmont)
- e.) Any additional forms your church might have.

Your group leader will be sure to bring your medical forms, release forms and covenants to the camps. **DO NOT MAIL FORMS TO THE PRESBYTERY OFFICE – They will only be sent back to your church!**

2) What to bring:

1. Bible
2. Sleeping bag/bedding
3. Pillow
4. Towels
5. Rain gear, jacket
6. Insect repellent
7. Sunscreen
8. Hat
9. Flashlight
10. Toiletry items
11. Clothing including long pants and sweatshirt (It can be cold and wet.)
12. 2 pairs of covered shoes (no flip flops or sandals – safety issue at camp)
13. Water bottle
14. Any prescribed medication which should be given to your sponsor to dispense.
15. (someone needs an alarm clock)

3) Confirmation of the date your group is attending has been mailed to your sponsors and they will confirm with you. Refunds (-\$20 processing fee) are available up to two weeks prior to the event. No refund will be made after that deadline. If your child cannot attend, please let your leaders know far enough in advance, so that someone else might use that spot from your church or from the waiting list.

4) Please note that food is not permitted in the cabins. It tends to attract the kind of neighbors that our site managers do not want in the cabins.

5) Damage to Camp property – If any individual damages camp, that individual will be held responsible and be asked to make payment for the damages.

6) Emergency numbers: Your Sponsor's Cell Number is the best thing to have use or Gilmont: 903-797-6400 and Glen Lake 254-897-2247

2019-2020 Prairie Valley Legacy Fund Scholarship Application

One Form Per Applicant

Prairie Valley was a rustic, church-owned, small group camping facility serving the Presbyterian congregations in the south and west ends of Grace Presbytery. It was managed by representatives from 21 congregations who made financial contributions to a not-for-profit corporation. When the property was sold in 2010, per a prior agreement, the proceeds reverted to First Presbyterian Church, Fort Worth, with the proviso that the money be used to provide "a program of Christian camping." Now, these funds are used to benefit the congregations, children, and youth of Grace Presbytery, with priority given to children and youth from the 18 remaining congregations that were part of the Prairie Valley Camp Corporation. If children and youth from these congregations do not use all of the annual budgeted proceeds, money is then available to applicants from across the presbytery. Any church or family in Grace Presbytery can apply for funds to send children and youth to KidQuake, Youthquake, JHaMS or any other PCUSA camp or conference. **Applications must be completed in full and submitted by snail mail, not by email or fax.**

Mail to: ONLY ACCEPTED BY SNAIL MAIL

Prairie Valley Legacy Committee
Attn. Josh Stewart for Youth
Attn. Amy Parker for Children

First Presbyterian Church
1000 Penn Street
Fort Worth, TX 76102

Circle one of the following

KidQuake YouthQuake JHaMS
Other _____

Camp/Conference _____ Camp/Conference Dates _____

Person for whom scholarship is needed _____ Date _____

Male _____ Female _____ Age of Attendee _____ Grade Completed _____

Street/Box # _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____

Email address _____

Number of dependent children in family _____

Amount of help needed (you must state a dollar amount) \$ _____

Reason help is needed (use back of page if necessary) _____

Parent/Guardian/Staff Signature _____

Applicants are expected to seek scholarships from their local church before applying for scholarship funds. This box must be completed by a church representative (Pastor, Educator, Children or Youth Pastor, or church officer). This section must be filled out in order for application to be considered.

Congregation: _____ City: _____ Amt. received: \$ _____

Signature of Pastor, Educator, Children or Youth Pastor, or church officer: _____

Date: _____

Who should we communicate with about this scholarship? Please make sure your information is legible.

Name: _____ Phone: _____

Email: _____

Check one of the following:

- We paid this student's registration fee in full, and if approved we request the scholarship check be mailed to the church at the following address _____
- Our church requests the scholarship check be sent directly to Grace Presbytery.
- My signature also verifies the applicant's need for scholarship assistance.
- Check if your church membership is 100 members or less.

Office use only:

Award \$ _____ Authorized by _____ Date _____