
Cedar Grove Checklist and Information



To Do

- Complete Cedar Grove Waiver Form
- Copy of Insurance card (**Front and Back**)
- Sign Carolina Christian School Permission slip for Cedar Grove

**** Paintball Activities will not be a part of the middle school retreat.****

CCS Middle School One Day Retreat 2017

Purpose: Provide an opportunity for the CCS Middle School to build a community of friendship through team building activities and emphasize the importance of their relationship with Christ.

Place: Cedar Grove Retreat 3350 Camp Julia Rd. Kannapolis, NC 28083

Departure from CCS: Monday, August 28, 8:30 am. **Return to CCS:** Monday, August 28th between 9:00-9:30 pm

Cost and Forms: \$95 and signed waiver forms are due by Monday, August 21st. (*Checks payable to CCS*)

Activities: Low ropes course, team building activities and the high ropes course. Students will also have designated time that will include swimming, paddle boats, canoes, volleyball, and disc golf.

Meals: 2 meals included: Lunch and Dinner only, so please eat breakfast.

Medications (*This only applies if your student must take medication while at the retreat*): If your child has to take ANY medications (over the counter or prescription including emergency medications such as Benadryl, epi pens, inhalers) while on the retreat, we must have a medication authorization form filled out by the student's physician. Medication bottle must have child's full name and date of birth. A trained staff member will keep the students medications while on the trip. Only send the exact amount needed for the retreat and take out any extra doses. If you have already sent in a medication authorization form and medication to the school please let us know and we will take the form and medication with us on the trip. Form and medication is needed prior to the morning of the retreat for the staff to acclimate themselves to your child's medical history. This is a school field trip and must follow the school medication policy found in the handbook.

Clothing: CCS tee-shirts and school length shorts (may be gym shorts as long as they are school length appropriate). Students will be engaged in many activities that require movement so please wear shorts that are no shorter than 2" above the knee and tennis shoes. No sandals. One piece swimsuits for females and swim trunks for males.

Other items: Bible, notebook, towel, and one change of clothes.

Misbehavior: We do not anticipate any problems, and we encourage parents to pray for the success of the retreat. We will go over the camp and retreat rules upon our arrival at Cedar Grove. If a student is expelled from the retreat, his/her parents will be called and they will have to come to Cedar Grove to pick up their child.

NO ELECTRONICS: Leave all electronic devices at home.

Prayer: Please pray that each middle school student has a safe, fun, and meaningful time during this retreat. It is our desire to honor our Lord Jesus Christ in every activity and meeting during this important time together. Thank you!

Transportation: We will be using the van and bus for transportation. We will also need a few other parents to transport the students. Please let us know if your child will need transportation or if you will be able to take your child only or your child and other students. If you can take other students please let us know how many more students you would be able to transport. We are looking forward to a great year!

Lisa Barbee

lbarbee@carolinachristianschool.com

***Retreat Fee will be billed to FACTS no later than August 11th.

**Challenge Course, Water Activities, Paintball,
Climbing Wall & other Recreational Activities Acknowledgement of Risk and Assumption of
Responsibility / Liability Waiver / Hold Harmless**

Cedar Grove Retreat Center offers a variety of activities that often include exercises, activities, group initiative problems, low element challenges and high element challenges like the climbing wall, among other activities. Participants engage in adventure activities always by their own choice, so the individual must assume the risk of injury. We do not want you to engage in activities that would be detrimental to your health or which might be opposed by your physician because of illness, injury or surgery. We ask you for the following information so we can be aware of potential problems to better help you safely enjoy your experience. Thank you for your assistance!

Participant's name: _____ Gender: M or F Birth Date: __/__/__

Address: _____

Home Phone: () _____ Business Phone: () _____

Group name: _____

Age: _____ Height: _____ Weight: _____

In case of emergency notify: _____ Relationship to you: _____

Number for emergency contact: () _____

I understand that during my participation in Challenge Courses, Paintball, Climbing Wall, Boating, Swimming or other Activities, I may be exposed psychologically and physically to stressful and challenging situations. I understand, too, that although the center has taken precautions to provide proper organization, supervision, instruction, and equipment for each activity, it is impossible for the center to guarantee absolute safety. I understand and appreciate that there are a number of inherent risks involved in these activities that are beyond the control of the camp or its staff and agree to personally assume such risk. Also, I understand that I share responsibility for safety and I assume that responsibility. Further, I waive any claim that may arise against Cedar Grove Retreat Center, Capstone Climbing and Adventure, Inc or its employees as a result of my participation in any activity. I accept responsibility for my personal health and verify that I have no physical or psychological problems that would prohibit my participation in the activity. I agree to comply with all instructions and directions of Cedar Grove Retreat Center, Capstone Climbing and Adventure, Inc or its staff during my participation.

Participant's Name (please print): _____

Date: _____

Participant's Signature: _____

Parent/Guardian Name (please print): _____

Date: _____

Parent/Guardian Signature: _____

(Signature of Parent or Legal Guardian required for participation)



July 24, 2017

Dear Middle School Parents,

The Middle school retreat will take place at Cedar Grove Retreat on August 28th. The students will be engaged in numerous outdoor activities such as low ropes courses, climbing high rope courses, and swimming. If your student has permission to participate please fill out the form below and return to Mrs. Barbee. This permission slip will allow the student to participate in the activities and ride on the school bus, van, or another adult's car.

Thank you,

Lisa Barbee
Dean of Students

"He will teach us His ways so that we may walk in His paths."
Micah 4:2b

_____ has my permission to attend the middle school retreat taking place at
(Student's Name)

Cedar Grove Retreat on August 28th. I understand the students will be engaged in numerous outdoor activities such as low rope courses, climbing high rope courses, swimming, and will ride on the school bus, van, or an adult's car to and from these activities.

Sign: _____ Date: _____
(Parent's Signature)

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