

the Wilds[®]
OF NEW ENGLAND

FRIENDLY FEUDIN'
SUMMER 2010

**IT'S TIME TO
"GIT YORE DANDER UP"**

for a little Friendly Feudin'! We had no i'deer that the skirmishes that took place in West Virginia and Caintucky in the 1800's would spill out onto us in New Hampshire. We dun divided up the camp into two mighty proud (and sometimes mighty ornery) families: the Hatfields and the McCays. Instead of plinkin' at each other with their trusty, rusty shootin' irons, they'll all be fix'n to engage in a might bit more civilized pastimes such as rollickin' original games, Funtimes that are guaranteed to have folk in stitches, and, of course, never-to-be-forgotten Freetime adventures! Why, it's even true that all the Friendly Feuders will set down in the Cool Beans Coffee Shoppe to eat, slurp, and declare a truce in the squabbl'n'. Everbody will set down to hear some good ol' fashion' preach'n, have interestin' cabin discussions, and enjoy refresh'n music. Y'all don't want to miss out! See you at the Friends Feudin' grounds at THE WILDS of New England. Let the feudin' begin!



Teen Camp Schedule

(Monday-Saturday)
 June 14-19.....Tom Farrell
 June 21-26.....Mark Herbster
 June 28-July 3.....Rich Tozour
 July 5-10.....Morris Gleiser
 July 19-24.....Mark Kittrell

Junior Camp Schedule

(Monday-Saturday)
 July 12-17.....Josh & Rand Hummel
 July 26-31.....Ben Farrell



Speakers



Travel Directions
to THE WILDS of New England

From Interstate 91: Take I-91 to Exit 3 for Brattleboro, VT/Route 9. Follow Route 9 toward Keene. Continue on Route 9 approximately 26 miles through Keene to the Hillsborough exit (Route 202). Turn right at the end of the ramp. At the first stop light turn left onto Main Street and follow approximately 2 miles. Turn right onto Route 149/Bridge Street. Follow Route 149 approximately 6 miles to the camp entrance on the left.

From Manchester, NH: Take Route 114 through Goffstown into Weare. After Country Three Corners Store and Lumberyard, turn left onto Dustin Tavern Road. Take an immediate right onto Deering Center Road/Route 149. Follow Route 149 approximately 6 miles to the camp entrance on the right.

Cost for Teen Campers: \$269*
Cost for Junior Campers: \$259*

***Early Registration Discount**

Camper registrations received or postmarked by February 1, 2010, will receive \$10 off the final balance due upon arrival at camp.

Registration Information

Teen campers must be at least 12 years old by September 1, 2010, and either going into Grades 7-12 or just completed Grade 12.

Junior campers must be at least 9 years old by September 1, 2010, and going into Grades 4-7.

Registrations are processed in the order they are received. A nonrefundable \$40 deposit per person must accompany each form.

Cost for Sponsors: \$219

Because of limited spaced on the campsite, sponsor couples will be housed separately. For information please call (828) 884-7811 or e-mail twne.summer.camps@wilds.org.

General Information

Registrations are confirmed after the completed registration form with the required, nonrefundable deposit is received in our office.

Arrival: The check-in window will open at 2:30 p.m. on Monday. The camp program will begin at 5:00 p.m. (Please try to arrive before 4:30 p.m.)

Departure: Camp ends at 9:00 a.m. after breakfast on Saturday.

What to bring: Bible, bedding, pillow, towels, toiletries, camera, flashlight, swimsuit, jacket, sports clothes for activities, nice casual clothes for informal services, at least one old pair of tennis shoes, and spending money (for a team shirt, the bookstore, coffee shop, camp memory DVD, etc). There is not an ATM available at the campsite. Many of the campers spend about \$35 during the week.

Do not bring: Alcoholic beverages, drugs, tobacco, fireworks, ammunition, guns, weapons, scooters, skateboards, rollerblades, magazines, apparel with inappropriate graphics or lettering, any type of electronic device including, but not limited to cell phones, CD, DVD, MP3, or other music/media players, computers, PDAs, radios, TVs, and video games

Christian conduct: As a Christian organization, THE WILDS maintains high standards of conduct and separation. Campers who use tobacco, alcohol, or any form of illegal drugs will be dismissed. Any noncooperative or noncompliant campers will be subject to dismissal.

Ladies/girls note: Please bring knee-length skirts or dresses for the evening services (skirts must not come above the knee). Any fashion worn must come at least to the top of the knee and cover the shoulders. Low necklines (front or back) are not acceptable camp attire. Loose-fitting pants, jeans, or knee-length fashions may be worn except when otherwise specified. Swimsuits should be one-piece and lined.

Men/boys note: Long pants and shirts with collars are required for evening services. Fashions to the knee may be worn at other times.

THE WILDS reserves the right to ask anyone to change his or her outfit if, in the estimation of the staff, it does not comply with these standards.

Lost and found: Lost items not requested in 30 days will be disposed of.

Camp nurse: A registered nurse will be on duty at all times. Special instructions will be given at camp for those taking medications. For the protection of the campers, we are unable to retain campers with contagious conditions such as chickenpox or lice. The camp has a "nit-free" policy. All campers need to be checked for lice prior to arrival at camp, and only those campers who are "nit-free" should be allowed to come.

Meals: All meals are included in the price of the camping program. Those on special diets must bring their own necessary supplements.

Late arrivals: Should your arrival be delayed past 5:00 p.m., please phone the camp office at (603) 529-0001 to hold reservations and give us an estimated arrival time.

THE WILDS of New England Registrations:

THE WILDS North Carolina Office
1000 Wilds Ridge Road • Brevard, NC 28712
Phone: (828) 884-7811
Fax: (828) 862-4813

Camp Address:

THE WILDS of New England
1181 Deering Center Road • Deering, NH 03244
Phone/Fax: (603) 529-0001

Attention Parents & Youth Workers:

- Campers do not have access to phones except for emergencies.
- Campers are expected to stay the entire camp period except for sickness or an emergency at home.
- Please mark all luggage and clothing with the camper's name.
- When writing a camper, please use the camp address listed above. Please be sure the camper's name is on the front of the envelope.

THE BIBLE — the source and substance of
our preaching, teaching, and counseling

Website: www.wilds.org

E-mail: twne.summer.camps@wilds.org

Please Select a Week of Camp:

Teen Camp

(Grades 7-12 & must be age 12 by Sept. 1, 2010)

- | | |
|---|----------------|
| <input type="checkbox"/> June 14-19 | Tom Farrell |
| <input type="checkbox"/> June 21-26 | Mark Herbster |
| <input type="checkbox"/> June 28-July 3 | Rich Tozour |
| <input type="checkbox"/> July 5-10 | Morris Gleiser |
| <input type="checkbox"/> July 19-24 | Mark Kittrell |

Junior Camp

(Grades 4-7 & must be age 9 by Sept. 1, 2010)

- | | |
|-------------------------------------|--------------------|
| <input type="checkbox"/> July 12-17 | Josh & Rand Hummel |
| <input type="checkbox"/> July 26-31 | Ben Farrell |

Name _____

Grade in Sept. 2010 _____

Age _____ Date of Birth _____ / _____ / _____

Address _____

City _____ State _____ Zip _____

Home phone (____) _____

My choice to room with _____
(One choice only, same grade or one grade higher or lower—first and last name, please!)

Church name _____

City _____ State _____

Pastor _____

- Male Camper
 Female Camper
 Adult Sponsor

- Church Group
 Individual

Office Use Only

Pd \$ _____

Registrations are confirmed when the completed registration form and the required **nonrefundable** \$40 deposit are received in our office.

To contact us BEFORE May 21, 2010:

THE WILDS of New England Registrations
1000 Wilds Ridge Road
Brevard, NC 28712-7273
Phone: (828) 884-7811
Fax: (828) 862-4813

To contact us AFTER May 23, 2010:

THE WILDS of New England
1181 Deering Center Road
Deering, NH 03244
Phone: (603) 529-0001

Signatures Required *for application to be processed*

"I have read the general information section in this brochure, and I agree to comply with the dress and conduct regulations while at camp."



Signature of camper

"I have read the general information section in this brochure, and I agree to support THE WILDS in their dress and conduct regulations for my child while at camp. In case of medical emergency, I understand every effort will be made to contact parents or guardians of campers. In the event I cannot be reached, I hereby give permission to the physician selected by the camp director to hospitalize and secure proper treatment for and order injection and anesthesia or surgery for my child as named above. I agree to the release of any records necessary for treatment, referral, billing, or insurance purposes. I also affirm that the medical information on this form is complete and correct."



Signature of parent or guardian

"I also give permission to use photos including the camper in camp publicity."



Signature of parent or guardian

Father's name _____

Phone (____) _____ E-mail: _____
 Business Cell Home

Address _____

City _____ State _____ Zip _____

Mother's name _____

Phone (____) _____ E-mail: _____
 Business Cell Home

Address _____

City _____ State _____ Zip _____

All registrations are processed in the order they are received. To pay your deposit, please fax this form with your credit card information or mail the form with your check or credit card information.

Enclosed with this registration form is:

- Charge \$40 Deposit (nonrefundable) Charge Total Amount



Card Number _____ Exp. Date _____

Print name as it appears on card _____ CVV # _____

Signature of cardholder _____

Medical Information

Please print clearly

Camper's physician _____

Phone (____) _____

Each camper must be immunized against the following: polio, measles, mumps, rubella, diphtheria, pertussis, and tetanus.

Date of last tetanus shot _____

Medication taken regularly _____

Reasons for taking medication _____

Specific Allergies:

Medication _____

Insects _____

Food _____

Other _____

Type of allergic reaction _____

Treatment given _____

Preexisting medical conditions _____

Specific activities to be restricted _____

Reason for restriction _____
