

## **{Discover} ADVENTURE!**

This summer you will discover challenging adventures, great relationships, new confidence, leadership abilities, and the wonders of nature.

**Join us and discover how much fun a week of camp can be!**

A session at God Camp involves campers in a unique program designed to promote personal growth within a Christian community. Each camper belongs to a group of twelve boys and girls guided by two counselors and two LIT's. They may tackle a building project, climb the challenge course, or climbing wall, hike a mountain, or catch a wave. The groups take an active part in planning their own activities like skits, songs, daily prayers, and flag making. Whatever the activity, time is always taken to discuss the discoveries that were made and to learn from the experience.

## **{Discover} GREAT RELATIONSHIPS**

Trained counselors and staff help campers feel confident about being themselves and joining in to work, play, live, and grow in a loving Christian environment.

## **{Discover} CONFIDENCE**

Discoveries in personal growth await young people at God Camp. Campers learn to their talents and creativity, become active stewards of God's magnificent creation, and explore new aspects of friendship, community and faith.

## **{Discover} GOD'S CREATION**

Spread out along the North Shore of Oahu Camp Mokulei`a is the perfect setting to discover God. This majestic setting is perfect for exploration, hiking, and swimming. Facilities include rustic cabins, open-air hot showers, dining hall, lodge, campsites, swimming pool, chapel, sports field, challenge course, climbing wall, and archery range. Although God Camp utilizes the camping grounds, the rest of the amenities is open yearly. Contact Camp Mokulei`a to make a reservation.

## **GENERAL INFORMATION TO ATTEND**

a summer session, complete the application form and send it with your payment to The Episcopal Diocese of Hawaii (Please make checks payable to The Episcopal Church in Hawaii). Early application is advised as spaces fill quickly. Deadline to apply is June 30, 2010

The Episcopal Church in Hawaii  
Attn: Lani Kaaihue RE: God Camp  
229 Queen Emma Square  
Honolulu, Hawaii 96813

## **COST**

\$280.00 per person

## **ACCOMMODATIONS**

at camp are rustic but comfortable. Tents that house six or seven campers (gender specified), supervised by a trained counselor. Restroom facilities include hot showers. Delicious, healthy meals are served family-style in the dining hall. Additional facilities include a swimming pool, lodge, beach, chapel, sports field, challenge course, climbing wall, and archery range.

## **CAMP MOKULEIA IS ACCREDITED**

by the American Camp Association. Rules for acceptance and participation in the camp program are the same for everyone without regard to national origin, creed, color, age, sex or handicap, providing that program requirements be met.

## **LEADERSHIP**

is provided by God Camp Director Katie Finrock, Spiritual Directors Jenny Wallace and Sue Macklin, Assistant Director Jar Pasalo, Worship Director Eric Pasalo, Arts-n-Crafts director Rose Pasalo, and Activities Director Bradley Cacayorin.

## **MEDICAL HISTORIES**

are required and accident insurance is carried on all campers. A complete list of things to bring and other special information will also be provided.

## **SESSION BEGINS**

Camp begins July 15 at 5:00 P.M. and will end July 22 at 1:00 P.M.

## **OUTER ISLAND TRANSPORTATION**

Needs to be done by the individual or the parish that is sending the campers. Information will follow about when the busses will be at the airport.

## **THE CAMPSHIP FUND**

A very limited fund is available, please email [Debbie@campmokuleia.org](mailto:Debbie@campmokuleia.org) or call (808) 637-6241 to request a Campership application. Assistance is based on financial need.

## **CANCELLATION POLICY**

No refund except in medical emergencies when 50% will be refunded.

# God Camp

# Camper Application 2010

### Please Print Clearly

Name: \_\_\_\_\_ Nick name \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_, Hawaii Zip Code \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alt Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Birth date: \_\_\_\_\_ Gender: M F T-Shirt Size: \_\_\_\_\_

Grade entering into the fall: 4            5    6    7    8

Home Church: \_\_\_\_\_

Island: \_\_\_\_\_

Do you take communion? Y or N

### Parent/ Guardian Info:

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Relation to Camper: \_\_\_\_\_

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Relation to Camper: \_\_\_\_\_

### Picture Release:

\_\_\_\_\_ I Do

\_\_\_\_\_ I Do Not

Give my permission for my child's picture and/or name to be published on the Camp Mokule'ia/Diocese Communications web site and brochure used for advertisement and Summer Camp purposes. With this authorization, I acknowledge that although God Camp does not authorize subsequent use of the pictures and names by others, it also cannot guarantee that dissemination will not occur.

Please Return Application by **June 30, 2010.**

The Office of the Bishop  
Attn: Lani Kaaihue  
RE: GOD CAMP  
229 Queen Emma Square  
Honolulu, Hawaii 96813

# God Camp

# Camper Application 2010

**Parent/Guardian Signature:**

As parent/legal guardian, I hereby give permission for my child to participate in the God Camp 2010. Camp Mokule`ia and the Episcopal Diocese of Hawaii staff are trained to consider safety issues during camp. However, I understand that there are inherent risks in camp activities and that my child's participation in these activities may involve risk of harm or injury. I also understand that neither the Camp Mokule`ia nor the Episcopal Diocese of Hawaii provides any kind of accident or medical coverage insurance for campers. Knowing the potential risks and my own obligations and responsibilities, I consent to my child's participation camp activities. Further, I agree to assume any and all risks of injury, damage or death resulting from my child's participation involving without limitation, transportation to and from camp, and release and discharge Camp Mokule`ia and the Episcopal Diocese of Hawaii, their officers, directors, employees, agents and volunteers (collectively, the "Church") from all liability arising out of or in connection with camp attendance and/or activities from any cause other than the active negligence or willful misconduct of the Church. For the purposes of this authorization and release, liability means all claims, demands, losses, causes of action, suits, or judgments of any and every kind that I, my heirs, executors, administrators, assignees or any other person or entity may have against the Church, because of death, personal injury or illness, or because of any loss or damage to property. I have received, read, understood and returned the Medical Questionnaire and Treatment Authorization Form, and this application, and agree to abide by the terms and conditions thereof, and am fully aware of the potential dangers incidental to my child's participation in the camp, and am aware of the legal consequences of signing this release.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please Return Application by **June 30, 2010**.

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