



SAVONA ELEMENTARY

Principal: Ms. Karla Chernoff
6665 Tingley Street Savona, BC V0K 2J0
Telephone No. (250) 373-2520 Fax No. (250) 377-2240
<http://savona.sd73.bc.ca/>

April 13, 2026

Dear Parents/Guardians;

We are very excited to announce that we will be taking part in a Grade 4-7 year end trip! This year, students will be travelling to Eagle Bay Camp, as you have most likely already heard. Mrs. Regan, students, and chaperones will be leaving the school at 9:30 am on Monday, June 15th and returning Wednesday, June 17th at 12:00 pm. Students will be dismissed upon their arrival back to school so please plan for someone to pick them up. The full schedule for our stay is attached.

You will find in this package a school permission slip, schedule, what to bring list, chaperone information letter and waivers for camp activities. Please read through them carefully, fill out the permission slip and waivers and return them to school as soon as possible. The deadline will be Friday, May 8th for forms as we need to confirm our numbers with the camp. Please let Mrs. Regan know as soon as possible if your child is unable to attend, or if they have any food allergies so that we can pass that information along to the camp cook.

Chaperones are a big part of making this trip possible. Without you, we will have no choice but to cancel the trip. We require 4 chaperones to make this happen which must include 2 males and 2 females. PAC has agreed to pay for these essential volunteers. Chaperones must have a valid criminal record check on file and must be able to commit to both days. They are likely not able to participate in the 7 skill activities but are required to fill out a waiver. A chaperone information letter is attached in the package for your review. Please let Mrs. Regan know if you can help chaperone as soon as possible.

The cost per student of \$195.00 is being graciously covered by the PAC, so the cost to the student is **\$0.00**.

There will be a tuck (candy) shop open during free time, and the Eagle Bay Camp store apparel is available for purchase on the last day. So, if desired, the students can bring spending money.

Thank you!

A handwritten signature in blue ink that reads "Karla Chernoff". The signature is stylized and cursive.

Karla Chernoff
Principal
Savona Elementary



HIGHER RISK ELEMENTARY FIELD TRIP PARENT CONSENT FORM

Principal's approval: [Signature]
Please return before: Friday, May 8th

Activity: Eagle Bay Camp Teacher: Mrs. Regan's Class & Ms. Mann's Grade 4's
Location: 5055 Eagle Bay Rd, Eagle Bay Date(s): Monday, June 15 - Wednesday, June 17, 2026
Departure time from school: 9:30 AM Arrival time back at school: 12:00 PM

Overview Itinerary for the Field Trip Program:

Students will be travelling by bus to Eagle Bay for 2 night. Please see the attached schedule for further details. Students will need to have a snack for the bus and a bagged lunch for the first day. Field Trip students will be dismissed upon return. Please plan for

someone to pick them up.
Transportation:

- Walking to and from the activity
- Transported by school bus
- Driven in private vehicles
- Drivers required

Volunteer drivers must be at least 21 years old and have at least \$1,000,000.00 liability insurance. There must be a seatbelt for each child/youth and no air bag on the front passenger side unless the passenger is 12 years of age or older. Drivers are responsible for complying with all child/youth restraint/booster seat requirements. Driver must have completed an SD73 Volunteer Driver Form.

Booster Seat Requirements for Private Vehicles:

- My child is over 9 years of age **OR** over 4 ft. 9 in. ⇒ No booster seat is required
- My child is over 18 kg/40 lbs **AND** under 4 ft. 9 in. ⇒ A booster seat is required
- My child will bring a portable booster seat. (Please note that it is the responsibility of the parent or guardian to provide booster seats, when required, for school field trips.)

Parent Helpers Required: Yes No

Lunch Required: Yes No (first day only)

Fee to be Paid: Yes No

Amount Required: \$ 0.00 Thank-you PAC!

* This permission slip must be returned for your child/youth's participation - written notes or phone calls will not be accepted to grant permission.

PERMISSION SLIP

The following statement must be signed by the parent/guardian for students participating in Higher Risk Field Trips:

I am aware and understand that participation in the Higher Risk Field Trip involves certain inherent risks, dangers and hazards which may result in serious personal injury or death or other loss or damage to property. I am aware that downhill skiing, Nordic track skiing, snowboarding and snow-blading, ice skating, road cycling, mountain biking, adventure hiking, canoeing, kayaking, swimming in natural settings, wilderness orienteering and residential camping are dangerous activities and that in addition to the usual risks inherent in these activities, certain additional dangers and risks including, but not limited to, varying snow, ice and visibility conditions and the danger and risk of collision with natural and man-made objects. For International travel, I have been informed that the Higher Risk Field Trip may become a dangerous activity due to global unrest. Further I agree that there may be other risks not known to me or not reasonably foreseeable at this time. I release and agree to indemnify and hold harmless the Board of School Trustees of School District No. 73 (Kamloops/Thompson) "the Board", its employees and agents ("the Releasees"). From any loss, claim, or demand for any and all negligence arising as a result of the Student's involvement or participation in the Higher Risk Field Trip except where such negligence is caused by the Releasees. I understand and accept that the Board and its employees and agents may at any time cancel the Higher Risk Field Trip for appropriate reasons including travel advisories indicating international air travel is unsafe or the destination is unsafe. Accordingly, I agree to waive any and all claims against the Board, its employees and agents for any monetary loss arising from the cancellation of the Higher Risk Field Trip. I understand that during the Higher Risk Field Trip the Student may incur additional unforeseen financial expenses required for reasons of safety and I agree to waive and reimburse for any and all claims against the Board, its employees and agents for any such expenses that are reasonably required. Both my child/youth and I understand that Board Policy #240 "Student Behaviour - Discipline" applies on all field trips. The use of alcohol or drugs and or inappropriate student conduct may result in suspension from school. Students engaging in these behaviours are liable to be sent home at their families' expense.

I have read and am informed about the proposed field trip to Eagle Bay Camp on June 15-17, 2026.

I request that my child/youth _____ participate in this trip. I understand there is a cost involved

and have enclosed \$ _____ with this form. I, the undersigned parent or guardian of the

above named student, request that my child/youth be allowed to participate in the trip.

List medical conditions/medication the staff/supervisor should be aware of: _____

Please supply the school with: family physician, Care Card number and emergency numbers (if not already on file).

Parent/Guardian Signature: _____ Phone: _____ Cell: _____

I can help drive # _____ students with seatbelts.

I have a Criminal Record Check on file at School Yes No

I have completed the Volunteer Driver Form: Yes No

I have a Volunteer Driver Form on file with the office and all information is still current: Yes No

Teacher/Office Use Only
Fee for Field Trip Received: Yes No Amount: _____ Initials: _____

UNDER 18 ALL-FOR-ONE WAIVER

*Denotes Required Field

Privacy Policy Release one-for-all waiver & assumption of risk

* Camper Name

* Participant Group

We at Eagle Bay Camp respect the privacy of personal information that is submitted to us and adhere to the CSA Model Code for the Protection of Personal Information. We collect information only for the purposes of this ministry, disclose it to others only as required, and are committed to protecting it to the best of our ability. We assume that your submission of a registration form represents your consent to collect, use and disclose information for the purposes listed in our Privacy Policy, the full copy of which is available upon request. We also respect your right to withdraw this consent at any time, though this will limit our ability to serve you in the future.

My child has my permission to attend Eagle Bay Camp. I am confident that the staff (both paid and volunteer) will do their best to give my child the necessary attention and supervision and that appropriate safety and health guidelines will be observed. I release Eagle Bay Camp, its employees, volunteers, directors, and officers from any and all liability or claims for damages arising from any accidents or personal injury caused by my child's participation in the camp program including (but not limited to) paintball, climbing tower, archery, blobbing, Sports, zipline, tubing and wide games. I understand these activities involve risk, dangers and hazards but I am confident the Eagle Bay staff, directors and volunteers will do everything in

RENTALS

RETREAT WAIVERS

UNDER 18 ALL-FOR-ONE WAIVER

OVER 18 ALL-FOR-ONE WAIVER

CLIMBING TOWER WAIVER

PAINTBALL WAIVER

ZIPLINE WAIVER

their control to safeguard and protect my child from these risks. I willingly give camp personnel the authority to act on my behalf in the event of an injury requiring emergency treatment or any other medical emergency involving my child (parent/guardian will be notified as soon as possible).

I signify that my child will be covered by a Provincial or equivalent medical plan while he/she is attending Eagle Bay Camp and understand that I am financially responsible for any additional costs incurred as a result of sickness or injury, including ambulance service. Unless prior arrangements have been made with the camp office, I give Eagle Bay Camp permission to use photos and videos of my child for their promotional materials only.

I do not wish my child to participate in activities (i.e paintball, climbing tower etc.)

I HAVE READ AND ACCEPT THE CONDITIONS OF THE RELEASE WAIVER AND ASSUMPTION OF RISK:

* Parent/Guardian Email

* Parent/Guardian Signature

Use your finger or mouse to sign in this box.

X

Clear Signature

* Date Signed

Submit

5055 Eagle Bay Rd, Eagle Bay, BC V0E 1T0

© 2025-2026 Eagle Bay Camp Powered by [Sunergo](#)

[Register/Login](#) [Donate](#)

CLIMBING TOWER WAIVER

*Denotes Required Field

Climbing Tower Waiver

EAGLE BAY CAMP CLIMBING TOWER WAIVER AND
RELEASE OF LIABILITY IN CONSIDERATION OF BEING
ALLOWED BY EAGLE BAY CAMP TO USE THEIR CLIMBING
FACILITIES,

I HEREBY AGREE THAT:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while under particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist.

2. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases or others, and assume full responsibility for my participation

3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however I observe any unusual hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest staff member immediately.

4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS EAGLE BAY CAMP, their officers, officials, agents, and/ or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of the premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASES OR OTHERWISE.

RENTALS

RETREAT WAIVERS

UNDER 18 ALL-FOR-ONE WAIVER

OVER 18 ALL-FOR-ONE WAIVER

CLIMBING TOWER WAIVER

PAINTBALL WAIVER

ZIPLINE WAIVER

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

* Participants Name

* Participant Group

* Date of Birth

* Participants Signature

Use your finger or mouse to sign in this box.

X _____

Clear Signature

* Date Signed

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for the participant, do consent and agree to his/her release as provided above of all the RELEASEES, and, for myself, my heirs, assigns and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above.

* Parent/Guardian Name

* Phone Number

() -

* Parent/Guardian Signature

Use your finger or mouse to sign in this box.

X

Clear Signature

* Date Signed

▼	▼	▼
---	---	---

Submit

Save Partial Response

5055 Eagle Bay Rd, Eagle Bay, BC V0E 1T0

© 2025-2026 Eagle Bay Camp Powered by Sunergo

Register/Login Donate

ZIPLINE WAIVER

*Denotes Required Field

Zipline Waiver

EAGLE BAY CAMP ZIP LINE ACTIVITY RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTIONS OF RISKS AND INDEMNITY AGREEMENT THIS IS A LEGAL DOCUMENT – READ CAREFULLY BETWEEN EAGLE BAY CAMP AND:

Participant (or guardian if under 18)

* Name Of Player

* Partipant Group

* Phone Number

() -

* Mailing Address City

* Postal Code

* Participant (or guardian if under 18)

* Province

RENTALS

RETREAT WAIVERS

UNDER 18 ALL-FOR-ONE WAIVER

OVER 18 ALL-FOR-ONE WAIVER

CLIMBING TOWER WAIVER

PAINTBALL WAIVER

ZIPLINE WAIVER

I CERTIFY THAT I HAVE READ THE TERMS AND CONDITIONS SET FORTH ON THIS AGREEMENT AND LIABILITY RELEASE IN ITS ENTIRETY, AND THAT I HAVE EXECUTED THE SAME OF MY OWN FREE WILL WITHOUT ANY DURESS WHATSOEVER, REALIZING THAT IT IS A LEGALLY BINDING AGREEMENT.

*** Signature of Player**

Use your finger or mouse to sign in this box.

X _____

[Clear Signature](#)

*** Date Signed**

▼	▼	▼
---	---	---

CONSENT OF PARENT OR GUARDIAN (REQUIRED FOR PARTICIPANT UNDER 18 YEARS OF AGE) IN CONSIDERATION OF THE FACILITIES PROVIDED BY EAGLE BAY CAMP TO THE ABOVE PLAYER,

I, **ENTER NAME BELOW** Parent and/or Guardian of the Player, minor, do hereby agree both on behalf of myself and said Player and his/her and my heirs, assigns and legal representatives, to all of the terms and conditions set forth in the above agreement. I have read and understand the agreement. I understand that by making this agreement I surrender valuable rights. I do so freely and voluntarily.

Parent/Guardian Name

Use your finger or mouse to sign in this box.

X _____

[Clear Signature](#)

Parent/Guardian Signature

Use your finger or mouse to sign in this box.

X _____

Clear Signature

Date Signed

* Phone Number

() -

Initial after reading

I HEREBY CERTIFY:

*** I am at least 18 years of age and in good mental and physical health and if I am under the age of 18, I will have a parent's or guardian's signature giving permission to participate in the game and agreement to this waiver**

Use your finger or mouse to sign in this box.

X _____

Clear Signature

IN RETURN FOR THE USE OF THE FACILITIES AND/OR ANY OTHER CONSIDERATION, I STATE AND AGREE THAT:

*** am aware that I am participating in an activity (hereinafter referred to as the "Zip line") which can be physically and mentally strenuous involving possible risk.**

Use your finger or mouse to sign in this box.

X _____

Clear Signature

*** I hereby undertake and assume total responsibility for any risk or injury resulting in the participation of a Zip line.**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** I undertake to Zip line only in accordance with the safety instructions, rules and guidelines communicated to me by the Eagle Bay Camp Staff.**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** I am aware that Eagle Bay Camp staff check the conditions or safety of equipment regularly and is in compliance with all safety standards set out for running a Zip Line course.**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** I hereby for myself, heirs, executors, administrators, successors and assignees, release, remise and forever discharge from any claims and liabilities whatsoever without limitations that I might have against Eagle Bay Camp and the owners of the property upon which the activity of Zip line is played from and against all liability, actions, claims, costs, (including legal costs), damages, and suits, arising out of, connected**

with, or resulting from my participation in a Zip Line without limitation, those resulting from the manufacture, selection, delivery, possession, use, or operation of such equipment. I hereby certify to Eagle Bay Camp and the Property Owners that I am in good health and do not suffer from a heart condition or other ailment that could be aggravated by the exertion involved in my participation.

Use your finger or mouse to sign in this box.

X _____

Clear Signature

*** I acknowledge that the foregoing release is intended to be as broad and inclusive as is permitted by the law of the Province of British Columbia, and that if any portion thereof is held to be invalid, the balance shall, nevertheless, continue in full legal force and effect.**

Use your finger or mouse to sign in this box.

X _____

Clear Signature

*** I understand and accept the responsibility for all equipment supplied to me by Eagle Bay Camp. If I damage or lose any portion of this equipment, I agree to pay all costs related to the replacement or repair of the damaged item(s).**

Use your finger or mouse to sign in this box.

X _____

Clear Signature

*** I further declare that this document has been drawn up in the English language at my request.**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** his agreement shall be binding upon me, as well as my heirs, executors, administrators and assigns.**

Use your finger or mouse to sign in this box.

X

Clear Signature

SEASONAL CONSENT: AT THE OPTION OF THE PARENT/GUARDIAN I AGREE TO THE WAIVER/CONSENT FORM BEING IN FORCE FOR THE CURRENT CALENDAR YEAR AND DO NOT REQUIRE ADDITIONAL CONSENT/WAIVER FORMS FOR EACH DATE THE PLAYER WISHES TO PARTICIPATE IN THE ACTIVITY OF ZIP LINE.

*** Signature of Parent/Guardian**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** Date Signed**

Submit

Save Partial Response

PAINTBALL WAIVER

*Denotes Required Field

Paintball Waiver

Eagle Bay Camp Paintball Activity Release of Liability, Waiver of Claims, Assumptions of Risks And Indemnity Agreement **This is a Legal Document** – Read Carefully Between Eagle Bay Camp and:

Participant **(or Guardian if under 18)**

* First Name of player

* Last Name of player

* Participant Group

* Phone Number

{ } -

* Mailing Address City

* Postal Code

* Participant (or guardian if under 18)

RENTALS

RETREAT WAIVERS

UNDER 18 ALL-FOR-ONE WAIVER

OVER 18 ALL-FOR-ONE WAIVER

CLIMBING TOWER WAIVER

PAINTBALL WAIVER

ZIPLINE WAIVER

I CERTIFY THAT I HAVE READ THE TERMS AND CONDITIONS SET FORTH ON THIS AGREEMENT AND LIABILITY RELEASE IN ITS ENTIRETY, AND THAT I HAVE EXECUTED THE SAME OF MY OWN FREE WILL WITHOUT ANY DURESS WHATSOEVER, REALIZING THAT IT IS A LEGALLY BINDING AGREEMENT.

*** Signature of Player**

Use your finger or mouse to sign in this box.

X _____

Clear Signature

*** Date Signed**

▼

▼

▼

CONSENT OF PARENT OR GUARDIAN (REQUIRED FOR PLAYERS UNDER 18 YEARS OF AGE) IN CONSIDERATION OF THE FACILITIES PROVIDED BY EAGLE BAY CAMP TO THE ABOVE PLAYER,

* I, (ENTER NAME BELOW) Parent and/or Guardian of the Player, minor, do hereby agree both on behalf of myself and said Player and his/her and my heirs, assigns and legal representatives, to all of the terms and conditions set forth in the above agreement. I have read and understand the agreement. I understand that by making this agreement I surrender valuable rights. I do so freely and voluntarily.

*** Signature of Parent/Guardian**

Use your finger or mouse to sign in this box.

X _____

Clear Signature

*** Date signed**

Initial after reading

I HEREBY CERTIFY: I AM AT LEAST 18 YEARS OF AGE AND IN GOOD MENTAL AND PHYSICAL HEALTH AND IF I AM UNDER THE AGE OF 18, I WILL HAVE A PARENT'S OR GUARDIAN'S SIGNATURE GIVING PERMISSION TO PARTICIPATE IN THE GAME AND AGREEMENT TO THIS WAIVER

IN RETURN FOR THE USE OF THE FACILITIES AND/OR ANY OTHER CONSIDERATION,

I STATE AND AGREE THAT:

*** I am aware that I am participating in an activity (hereinafter referred to as the "Paintball Game") which is a physically and mentally strenuous game involving possible risk of injury from equipment, other players, and the playing environment.**

Use your finger or mouse to sign in this box.

X _____

Clear Signature

*** I hereby undertake and assume total responsibility for any risk or injury associated with playing or participation in the paintball game.**

Use your finger or mouse to sign in this box.

X _____

Clear Signature

*** I undertake to play the Paintball Game only in accordance with the safety instructions, rules and guidelines which I hereby acknowledge as having read and understood.**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** I am aware that Eagle Bay Camp does not warrant the condition or safety of equipment, facilities or premises, natural and constructed, or the availability of emergency medical care, connected with the Paintball Game.**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** I hereby for myself, heirs, executors, administrators, successors and assignees, release, remise and forever discharge from any claims and liabilities whatsoever without limitations that I might have against Eagle Bay Camp and the owners of the property upon which the Paintball Game is played from and against all liability, actions, claims, costs, (including legal costs), damages, and suits, arising out of, connected with, or resulting from my playing the Paintball Game, including, without limitation, those resulting from the manufacture, selection, delivery, possession, use, or operation of such equipment. I hereby certify to Eagle Bay Camp and the Property Owners that I am in good health and do not suffer from a heart condition or other ailment that could be aggravated by the exertion involved in playing the game.**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** I acknowledge that the foregoing release is intended to be as broad and inclusive as is permitted by the law of the Province of British**

Columbia, and that if any portion thereof is held to be invalid, the balance shall, nevertheless, continue in full legal force and effect.

Use your finger or mouse to sign in this box.

X

Clear Signature

*** I understand and accept the responsibility for all equipment supplied to me by Eagle Bay Camp. If I damage or lose any portion of this equipment, I agree to pay all costs related to the replacement or repair of the damaged item(s).**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** I further declare that this document has been drawn up in the English language at my request.**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** This agreement shall be binding upon me, as well as my heirs, executors, administrators and assigns.**

Use your finger or mouse to sign in this box.

X

Clear Signature

SEASONAL CONSENT: AT THE OPTION OF THE PARENT/GUARDIAN I AGREE TO THE WAIVER/CONSENT FORM BEING IN FORCE FOR THE CURRENT CALENDAR YEAR AND DO NOT REQUIRE ADDITIONAL CONSENT/WAIVER FORMS FOR EACH DATE THE PLAYER WISHES TO PLAY THE PAINTBALL GAME.

*** Signature of Parent/Guardian**

Use your finger or mouse to sign in this box.

X

Clear Signature

*** Date Signed**

Submit

Save Partial Response

5055 Eagle Bay Rd. Eagle Bay, BC V0E 1T0

© 2025-2026 Eagle Bay Camp Powered by [Sunergo](#)

[Register/Login](#) [Donate](#)

Chaperone Information Letter

Please review the following prior to your stay at camp:

- Chaperones are likely not able to participate in all skills. This includes skills that require equipment such as zip line, paintball, climbing, kayaking and archery. This is because we want to ensure all the students get to fully experience the skill. Please do not question our skill staff on this issue. They are there to facilitate an activity and need to concentrate on their task.
- We ask that at least one teacher and/or chaperone are seated at each table during meals. This helps with less mess making and helps lower noise levels.
- Under no circumstances, is there any smoking or drinking on camp property at any time. This includes the docks. We will have a designated area for smoking if needed.
- We will provide freezer space for ice packs. We appreciate your cooperation and we are looking forward to having you all out at Eagle Bay Camp.

Thank you, Eagle Bay Camp

School Group Retreats Schedule

Day 1

11:30 am	Arrival/Welcome/Rules
12:00 pm	Lunch (Bring Own Bag Lunch)
1:00 pm	Skill Session #1
2:15 pm	Skill Session #2
3:30 pm	Skill Session #3
4:45 pm	Free Time/Waterfront
5:30 pm	Dinner
7:00 pm	Wide Game #1
8:30 PM	Mug Up
9:00 pm	Campfire
10:30 pm	Lights Out

Day 2

8:30 am	Breakfast
9:30 am	Skill Session #4
10:45 am	Skill Session #5
12:00 pm	Lunch (served)
1:30 pm	Skill Session # 6
2:45 pm	Skill Session #7
4:00 pm	Free Time/Waterfront
5:30 pm	Dinner
7:00 pm	Wide Game #2
8:30 pm	Mug Up
9:00 pm	EBC Dance
10:00 pm	Night Game
11:45 pm	Lights Out

Day 3

8:30 am	Breakfast/Pack & Clean Up
10:00 am	Leave for Home

Skill Sessions we offer cannot be substituted. You will receive these 7 for your retreat:

- Zipline
- Kayaking
- Blobbing
- Field Games
- Climbing Wall
- Paintball
- Archery

What to Bring

- Sleeping Bag
- Pillow
- Toothbrush & Toothpaste
- Soap, Shampoo & Towel
- Facecloth
- Rain Jacket
- Swimwear
- Clothes for all activities (mark your important items)
- Sweater or Coat
- Good Running Shoes
- Water bottle
- Flashlight
- Medication
- Sunscreen & Bug repellent
- Clearly labelled medications (these will be given to the nurse at registration)

You will also need to bring a bagged lunch for the first day.