

# Wilderness Camp

## Finding Strength in the Wilderness

### for Middle School & High School

#### (6th -12th grade)

September 29–October 1, 2017



During Wilderness Camp, campers will look to the Gospels and reflect on Jesus in the Wilderness and how it relates to us. Campers will also experience building shelter, campfires, cooking in Dutch ovens, building long lasting relationships and growing in faith.

**Cost: \$215 per camper. Cost includes the canteen fee.**

**Tentative Schedule:**

**Friday**

5:00-6:00 p.m.	Registration/Check-In (Retreat Center)
6:00 p.m.	Dinner
7:00 p.m.	Energizers, Mix & Mingle and Evening Devotional
8:00 p.m.	Recreation and Snacks
10:30 p.m.	In Cabins
11:30 p.m.	Lights out

**Saturday**

9:00 a.m.	Breakfast
10:00 a.m.	Morning Prayer and Devotional
10:30 a.m.	Living in the Wilderness
12:30 p.m.	Lunch
1:30 p.m.	FOB
2:30 pm	Canteen
3:00 p.m.	Living in the Wilderness
6:00 p.m.	Dinner
7:00 p.m.	Energizers, Music and Evening Devotional
8:00 p.m.	Mission Project, Recreation and Smore's
10:30 p.m.	In Cabins
11:30 p.m.	Lights Out

**Sunday**

9:00 a.m.	Breakfast
10:00 a.m.	Pack up & clean cabins
10:45 a.m.	Group Photo
11:00 a.m.	Worship
12:45 p.m.	Depart

## **Registration**

To register your child for Wilderness Camp, a completed registration form and a non-refundable deposit of \$100 must be received on or postmarked by September 22, 2017 and mailed to:

**Camp Pee Dee Retreat Center**  
1201 Camp Pee Dee Road  
Bennettsville, S.C. 29512

**Please make checks payable to:**  
The Presbytery of New Harmony

**Please note:**

The full amount is due on the day of arrival.

## **Scholarships**

Camp Pee Dee Retreat Center offers a limited number of scholarships.

**Questions:**

Please contact Kelly at (843) 479-3051 with any questions or if you need additional information.

**What to Pack:**

Bible	Sleeping bag or twin sheets	Blanket
Pillow	Towel/wash cloth	Walking shoes
Flashlight	Bath soap & toiletries	Comfy clothes

# Registration Form

Name: \_\_\_\_\_

Preferred Name on Name Tag: \_\_\_\_\_

Gender: \_\_\_\_\_ School Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

Parent/Guardian: \_\_\_\_\_

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

Day Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Church (if any): \_\_\_\_\_

Cost: \$ 215 Church Gift: \$ \_\_\_\_\_

Non-refundable Deposit: \$ \_\_\_\_\_

Total Amount Due on Day of Arrival: \$ \_\_\_\_\_

Roommate Request (1): \_\_\_\_\_

Roommate Request (2): \_\_\_\_\_

Special Needs or Dietary Needs: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_