

Kentucky Mission Trip

6th - 8th Grade



**This packet includes information for the
Kentucky Mission Trip
July 21- 28, 2012**

What do I need to do before I go?

- 1.) Get three prayer partners to pray for you while you prepare to leave and while you are gone.
- 2.) Send support letters to relatives and friends for prayer and financial support – start now.
- 3.) Attend all pre-trip meetings and training seminars (Dates to follow)
- 4.) Begin to prepare yourself now. The conditions are going to be different than what you are used to. The work will be hard, the days will be long, and your patience will be tested. Find out all you can about the state of Kentucky. This will help you understand the people and the areas we will be working in.
- 5.) Turn in Application, Medical Form, Insurance Card, and \$200 deposit (non-refundable).

The Total Cost of the Trip is \$450

- Deposit of \$200 is due on April 8th, 2012 (**NON-REFUNDABLE**)
- Remainder due on July 8th, 2012
- Go to myriveroaks.org for online payment information

We will not accept participants after Sunday, June 3rd, 2012

What will we do?

We will be working on projects in the community around Salt Lick, KY. We may be working on a new house or remodeling an old house. In the past we have done painting, roofing and many other construction projects. Plan to get hot and dirty. One afternoon we will go swimming and one afternoon we will have an outreach for the community. We encourage you to get to know the people you are working for. We will have evening worship services and free time each day.

Where will we stay?

We will be staying at the Four Seasons Camp in Salt Lick, KY. The cabins are small but clean. There will be 6 to 8 people in a cabin. The shower and bathroom facilities are located in the center of the camp. We will have a camp nurse for the week. The camp has a nice dinning hall and a large chapel for our evening meetings. The camp has a nice new swimming pool for afternoon cool off.

How early do we have to get up?

The following is a typical daily schedule. This is a sample only and will be adjusted to fit our needs and the needs of the people whom we are working for. Flexibility is important here.

Typical Day

7:00 am	Rise and shine	6:30 pm	Leaders Meeting
7:30 am	Breakfast	7:00pm	Small Groups
8:00 am	Quiet time / devotions	8:00pm	Chapel
8:45 am	Leave to work projects	9:30 pm	Free time
5:00 pm	Arrive back to camp & shower	10:30 pm	In cabins
6:00 pm	Dinner	11:00 pm	Light Out

All times are subject to change as the Lord leads!

**Kentucky Mission Trip
Tentative Schedule**

Saturday, July 21, 2012

8:00 am Meet at Church (Do not be late, arrive at 8am sharp)
8:30 am Leave from Church
4:30 pm Arrive at Camp
6:00 pm Dinner
6:30 pm Leaders meeting
7:00 pm Small Groups
7:30 pm Introductory meeting/Chapel
9:30 pm Free Time
10:30 pm In Cabins
11:00 pm Lights out

Sunday

9:00 am Breakfast
10:30 am Go to local Church for Worship
12:30 pm Lunch
1:00 pm Free afternoon
5:30 pm Dinner at Camp
6:30 pm Leaders meeting
7:00 pm Small Groups
8:00 pm Chapel
10:00 pm Free time
10:30 pm In Cabins
11:00 pm Lights outs

Monday – Friday (except Outreach night)

7:30 am Breakfast
8:00 am Quiet Time
8:45 am Leave for work sites/ eat lunch at work site
5:00 pm Arrive back at camp / swim at pool / Shower
6:00 pm Dinner
6:30 pm Leaders meeting
7:00 pm Small Groups
8:00 pm Chapel
9:00 pm Family time
9:30 pm Free time
11:00 pm Lights out

Outreach Night TBA

Saturday, July 30, 2012 (last day)

7:30 am Breakfast
8:00 am Quiet time
8:30 am Clean Up Camp
9:00 am Head for home

Kentucky Mission Trip Packing List

(Please label all belongings with your name. Bring only one suitcase.)

Clothing:

- ___ Tennis shoes or sandals for casual wear
- ___ Work boots or sturdy shoes for work sites
- ___ Flip flops or shower shoes for the showers
- ___ **One piece bathing suit** and beach towel
- ___ Work socks (at least 3 pair)
- ___ Work pants (lightweight, at least 2 pairs)
- ___ Work shirts (at least 3 shirts)
- ___ Work gloves (one pair)
- ___ Shorts for evenings (no short shorts)
- ___ Casual shirts for evening activities (no tank tops, tight or low cut tops, no spaghetti strap tops)
- ___ Sleep wear (modest and conservative, no spaghetti straps or tank tops)
- ___ Hat or bandanna for work
- ___ Poncho or rain cover (if desired)
- ___ A belt if your pants are baggy (or the moms will be pulling up your pants)

Other items:

- ___ Bible
- ___ Notebook journal, pencil, pen
- ___ Personal toiletries (toothpaste, toothbrush, soap, shampoo, deodorant, etc)
- ___ Medication you take regularly (in original containers, then labeled in a zip lock bag)
- ___ Extra pair of glasses or contacts (if you wear them)
- ___ Small Kleenex packages
- ___ Wet ones (antibacterial wipes)
- ___ Two towels and two washcloths
- ___ Single bed sheets or lightweight sleeping bag
- ___ Pillow and pillow case
- ___ Sunglasses
- ___ **Sunblock** (at least an SPF of 15)
- ___ Plastic trash bags (for dirty clothes)
- ___ Munchies (bring zip lock bags for after they're opened to keep the bugs out)
- ___ Camera and film (disposable camera labeled with your name is preferred)
- ___ Hammer & nail apron
- ___ Refillable water bottle for the work site
- ___ **Bug Spray**
- ___ Flashlight – don't forget this!
- ___ \$50 max (spending money for snacks, 2 meals while traveling, church offering, souvenirs)

What should I leave at home?

1. Tobacco, Alcohol, or other drugs (strictly prohibited, no grace with this one)
2. Anything expensive that you wouldn't want to lose (jewelry, Gap jeans, Hilfiger shirts, etc.)
3. All electronic equipment (Game Boys, radios, CD players, headsets, etc.) **NO CELL PHONES or PAGERS**
4. All bad attitudes.

Kentucky Mission Trip Parent Page

River Oaks Youth Ministry is committed to providing a safe and rewarding mission experience for our youth. There is some risk involved in any such experience, including, but not limited to, travel to and from the work site daily, injury or accidents on the work site, and illness. We strive to keep our youth out of hazardous situations, and train them for safe work. They are closely chaperoned and supervised by our Youth Leaders. Girls and guys are housed separately, and we have very strict rules about no visitors of the opposite sex in the housing facilities. We require our youth to act responsibly at all times, and to follow the rules and instructions set forth by our adult chaperones. If any youth demonstrates irresponsible, dangerous or reckless behavior, the parent will be called and the youth will be sent home. Our goal is to serve the Lord, reach out to others in need, all while enjoying our time together. We will have long days and work hard, but this will be a very enriching and rewarding experience for your youth.

Appropriate dress is extremely important for the youth on this trip. Short shorts, short skirts, sundresses, tank tops, low cut, spaghetti strap, or tight fitting tops are not permitted for the girls. Swimsuits need to be modest and conservative (one piece suits for the girls). Boy's pants must be pulled up appropriately – no boxers showing. Send a belt if pants are loose. When packing, remember that we are representing River Oaks Church and the Christian Community.

Lightweight, cotton clothes are best for work. Painter's pants or hospital scrubs are recommended. Jeans will be too heavy and hot. Shorts should be fingertip length or longer. It is best to pack things that are easy to hand wash, quick to dry, and need no ironing.

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*This information packet as well as the packing list, medical form, and application can be downloaded and printed from the youth website at www.roccyouth.org by clicking on the youth page under "Ministries" on the main page.

Please call the church office with any questions: 766-0033.

Emergency Contact

Four Season's Camp 606-768-2775 (Kitchen # -Best time to reach 7am-6pm)
Chip's Cell 336-682-2559* It may not work in all areas in the hills of Kentucky

River Oaks Community Church
Youth Medical Form and Consent for Trip
WE WILL NOT ACCEPT WITHOUTH COPY OF INSURANCE CARD

Please attach a
photocopy of front and
back of Insurance Card

(Please print)

Youth Name: _____ Nickname: _____
Home Address: _____ City: _____ State: Zipcode: _____
Home Phone: () _____ Age: _____ DOB: _____

Health Problems: _____
Daily Medicines: _____
Medicine Allergies: _____
Food Allergies: _____ Bee Sting or Other Allergies: _____ Last Tetanus Shot: _____

Does the student have any the following: (Please circle Yes or No)

Diabetes: Yes No Asthma: Yes No Seizures: Yes No Heart Problems: Yes No
Insulin: Yes No Epi-Kit: Yes No Inhalers: Yes No Neb Machine: Yes No

(Note: If the student ever needs an Inhaler, Neb Machine, Epi-Kit or Glucose Monitoring kit, it MUST be brought on this trip)

Parent/Guardian Name: _____
Home #: () _____ Work #: _____ Pager/Cell #: _____

Parent/Guardian Name: _____
Home #: () _____ Work #: _____ Pager/Cell #: _____

Other Emergency Contact Name: _____ Phone: () _____

Health Insurance: _____ Policy Number: _____
Doctor's Name: _____ Doctor's Phone: () _____

My Child _____ has my permission to attend the River Oaks Community Church Youth Mission Trip to the Appalachian Impact Project in Salt Lick, KY from July 21 – 28, 2012. I hereby release River Oaks Community Church from all liability should any injury occur on this trip. **Sign:** _____

I give my permission for the Adult Chaperones to administer minor first aid to my child should the need arise. This may include the use of over-the-counter medicines, including: Tylenol or Advil for minor fever/aches/pains; Sudafed for congestion; Benadryl for allergies/rash; Robitussin DM and/or cough drops for coughs; Dramamine for motion sickness or nausea; Visine eye drops for eye redness/irritation; Immodium for diarrhea. I have crossed out any of the medicines that I do not want given to my child. **Sign:** _____

I also give my permission for the Adult Chaperones to use their judgement should my child need urgent medical care. I expect the Adult Chaperones to attempt to contact me before my child is taken to an Urgent Care Facility or Emergency Department, unless there is a life threatening situation, then I expect to be contacted as soon as possible. I hereby authorize the Adult Chaperone to sign for my child's medical treatment should the need arise. I understand that I am ultimately responsible for all medical expenses incurred. **Sign:** _____

I am sending my child's prescription medicines (if any) for the Adult Chaperone to administer to my child. I am also sending non-prescription medicines (if any) that my child may need. I am sending all medicines in their original containers that are clearly labeled with the child's name, and how often the medicine is to be given. All medicine containers are in a zip lock bag that is labeled with my child's name. I acknowledge that all medicines are to be in the care of an Adult Chaperone for dispensing to my child. **Sign:** _____

I agree with the above, and hereby give my consent for this trip.

Parent/Guardian Signature for above: _____ **Date:** _____

*****Important note: Please staple a photocopy of the front and back of Insurance card to this form*****

For office use only – Reviewed by: _____