

## Vital Camp Information

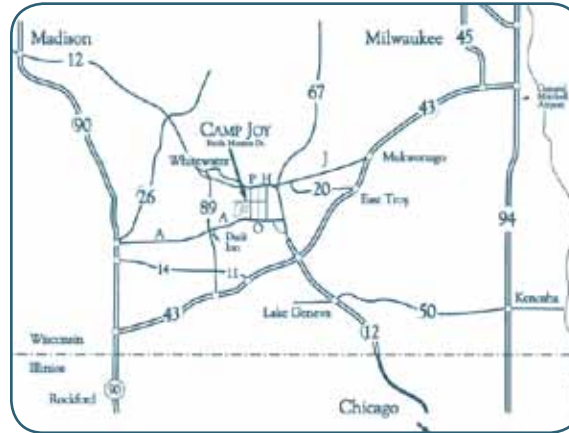
**WHAT TO BRING:** Bible, warm twin-sized bedding or sleeping bag, pillow, towels, toiletries, ice skates.

**DRESS:** For winter activities bring warm clothing, including an extra pair of shoes. Please do not bring clothing with inappropriate advertising. In striving to maintain modesty and a Christ-honoring atmosphere, we request that you follow these dress guidelines:

**GIRLS:** Ski pants, loose-fitting slacks, and culottes are acceptable for activities, but we ask that you wear dresses or skirts for services. Dresses, skirts, and culottes should cover the knee. Slits should not come above the knee when standing or sitting.

**GUYS:** Collared shirts and nice pants for services.

**DO NOT BRING:** Tobacco, alcoholic beverages, drugs, playing cards, magazines, radios, mp3/CD players, iPods, video games, DVDs, cell phones, PDA's, or other electronic devices.



## We're Close

From Chicago (70 miles) I-94 North to WI Hwy 50 West (toward Lake Geneva) for about 23 miles; turn onto Hwy 12 West and follow for about 22 miles to Cty Rd O; turn left and go to Kettle Moraine Drive; turn right; cross over Cty Rd P (bank on corner); entrance 0.2 miles on left.

From Rockford (45 miles) I-43 North to Hwy 14 North at Exit 15 (Darien); turn left onto Hwy 14 North and go 3.4 miles to four-way stop; go straight onto Hwy 89; follow for 4.7 miles to Cty Rd A; turn right and follow to Cty Rd P; turn left and follow to Kettle Moraine Drive (bank on corner); turn left; entrance 0.2 miles on left.

From Milwaukee (45 miles) I-43 South to Hwy 20 at Exit 38 (East Troy); turn right onto Hwy 20 and follow to second four-way stop; turn right onto Hwy 12 West and go to Cty Rd O; turn right and go for 1 mile; turn right onto Kettle Moraine Drive; follow across Cty Rd P (bank on corner); entrance 0.2 miles on left.

From Madison (35 miles) I-90 East to Hwy 59 at Exit 163; follow Hwy 59 East (toward Milton) to Cty Rd N; turn left and go 10.5 miles to Hwy 12 East; turn right and go to Cty Rd P; turn right and follow to Kettle Moraine Drive (bank on corner); turn right; entrance 0.2 miles on left.

Please send your registration form to:



W7725 Kettle Moraine Drive | Whitewater WI 53190-4218  
Phone: (262) 473-3132 Fax: (262) 473-0941  
staff@campjoy.org www.campjoy.org



# CAMP JOY'S Winter Retreats

Junior Winter Retreat February 19-20, 2010  
Winter Teen Retreat January 14-16, 2010  
March 12-13, 2010



**teen**  
**Winter Teen**  
 Speaker: Bryan Samms  
 January 14 -16, 2010

**WINTER TEEN EARLY BIRD**

Retreat Cost: \$60, if postmarked by December 1, 2009.  
 After December 1, 2009, the retreat cost is \$65.

January 14-16, 2010  
 Registration: Thursday, 4-6 PM  
 Departure: Noon on Saturday, after lunch.

**Teen Retreat Cost: \$65 per person**  
**Junior Retreat Cost: \$25 per person**  
 plus \$5 non-refundable, non-transferable registration fee



**juniorONE**  
**JUNIOR WINTER I**  
 Speaker: Bob Loggans  
 February 19-20, 2010



**juniorTWO**  
**JUNIOR WINTER II**  
 Speaker: Tim Collard  
 March 12-13, 2010

Registration: 6-8 PM on Friday. Program begins at 8 PM on Friday and ends at 3:30 PM on Saturday. A snack will be provided Friday night, but not a meal.

**A Blizzard of Activities**

Fun, original games between the Polar Bears and the Eskimos, Ft. A-maze-ing, rifle range, toboggan run (no snow needed), and sky glide.

Whether we have snow or not, the activities will be a chilling **BLAST!**



**Weather Permitting:**

**NIGHT TUBING, HOCKEY,  
 ICE SKATING,  
 SNOW-MO-BUGGIN'  
 Always:  
 GREAT FOOD,  
 GREAT PREACHING,  
 GREAT FELLOWSHIP,  
 AND MUCH MORE....**

**Reservations:** All accommodations are reserved on a first-come, first-serve basis. Reservations cannot be confirmed or guaranteed without registering in advance. We encourage all church groups to call with an estimated attendance four weeks before the retreat. Sponsors pay the same rate as campers, but are housed in hotel-like rooms (while available).

**Junior Winter or Winter Teen  
 Registration Form 2010**

Register online at: [www.campjoy.org](http://www.campjoy.org)

M  F  I am a sponsor

Name		Birth date / /	
Address			
City	ST	Zip	
Phone ( ) -	E-mail		
Parent's Name			
Church			
Street			
City	ST	Zip	
Pastor's Name			
Roommate Request			

**CAMP ATTENDING (PLEASE CHECK ONE):**

- Winter Teen, January 14-16, 2010
- Junior Winter I, February 19-20, 2010
- Junior Winter II, March 12-13, 2010

PLEASE NOTE: I give Camp Joy my consent to secure any necessary medical treatment for my child during the camping period. I also authorize any qualified physician to render treatment he or she deems necessary upon consultation with the camp staff. I authorize over-the-counter medication to be provided by the health care staff. I realize my insurance will be billed for any medical treatment as the primary coverage for my child. (Note: Please do not send any medications unless prescribed by a health care provider. All medications need to be in the original medication containers. Please send one extra day's medicine for the week. Non-prescription medicine should not be brought to camp.)

ALLERGIES:  None  Asthma  Penicillin  
 Antibiotic Ointment  Bee Stings  Other \_\_\_\_\_

Medications: \_\_\_\_\_

Reasons for Medications: \_\_\_\_\_

Personal Physician: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Policy Holder: \_\_\_\_\_

Date of Last Tetanus Shot: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Physical Problems or Limitations: \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Parent's Signature Date

Please send a \$5 non-refundable, non-transferable fee with your registration form. The balance will be due when you arrive at camp.