# SLIPPERY.ROCK.BAPTIST.CAMP









...behold, now is the day of salvation.

SRBC is an eternal investment of the greatest kind! People of all ages come to learn, grow and thrive under the atmosphere of Godly teaching and Christ-centered fun.

slipperyrockbaptistcamp.org secretary@slipperyrockbaptistcamp.org

### **RETREATS & FESTIVALS**

April 25 & 26—Spring Youth Retreat
September 12 & 13—Fall Ladies Retreat
September 19 & 20—Fall Men's Retreat
September 26 & 27—Fall Youth Retreat



www.slipperyrockbaptistcamp.org

## 2025 CAMP ACTIVITIES

Contact camp at 724.530.7411 or email camp
June 25—27—Staff Training
Email for application:
secretary@slipperyrockbaptistcamp.org
June 30 - July 5—Family Camp
June 30 - July 4—Primary Day (Grades 1-3),
June 30 - July 4—Basketball (Sports)
Day Camps (Grades 4-12)
July 2—Fireworks Night—All Invited!
July 7 - 12—Senior High Camp
July 14 - 19—Junior Camp
July 21 - 26—Junior High Camp
Overnight campers receive a camp t-shirt—
Day Campers may purchase one for \$7.00

**WORK WEEKS:** 

June 9-13—Work Week I

June 16-20—Work Week II

Many hands make light work! Come yourself or gather a group to help! Come for a day or two or the whole week! Can't come during the week? Call office or Pastor Dave to arrange time for you & your group to come!

Dear Parents—for the purpose of helping your kids to have a true "camp" experience as well as keep them safe from inappropriate content, we have adopted a no cell phone policy at SRBC. Campers will be asked to place their phones or other technology devices into a safe box provided for each cabin. Staff will always be available with phones in case of emergency.

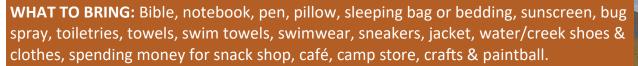
All questions may be addressed to the Camp Director, Pastor Dave; otherwise, thank you for entrusting us with your kids!

We're looking forward to a great 2025 camping season!!

Mail completed registration form to: SRBC, 130 Elliott Lane, Slippery Rock, PA 16057

Questions? Call office at 724.530.7411

**REGISTRATION:** Monday 11 am (lunch included) **DEPARTURE:** Saturday 10 am (breakfast included)



WHAT NOT TO BRING: iPods, laptops, gaming devices, radios, magazines, illegal drugs, any type of firearms/weapons, cigarettes, tobacco products, alcohol, firecrackers, and non-prescription drugs

**DRESS CODE:** jeans or shorts (must be 2" or less above the knee-"fingertip length"). Graphic t-shirts may be worn, however, designs should be appropriate and not offensive or "off-color." Tank tops may be worn with straps approx. 2-4" wide. (no spaghetti strap tops please)

**SWIMMING:** For boys: boxer-type swim trunks/shorts. For girls: modest, one-piece or tankini top swimsuits. During water games, t-shirts must be worn by both boys and girls (over swimsuits).

**HEALTH & SAFETY:** We are committed to providing a safe and enjoyable camping experience for all of your campers. A full-time registered nurse is available 24 hours a day. A certified lifeguard will be present during all swimming activities. Our health center is supplied with OTC medications. Please do not send any OTC medications with your campers. Please send a signed & completed Medication Authorization Form with prescription medications (in original pharmacy container). This will be kept with the nurse to administer medications at regular dosage times.

**EXTRA CAMP COSTS:** Snack Shop, Camp Store, Café, Mocha Motion, Craft Hut and Paintball. Paintball: \$10 to play (rental included), \$5 per 100 paintballs

**PRIMARY & SPORTS DAY CAMPS:** This is a very special week at SRBC. We invite you to bring a whole busload of children from your church and community for Bible time, music, snacks, crafts, playtime, swimming and quality childhood activities. Sports camps will teach skills and have devotional times. Day Campers should bring a change of clothes, swimsuit & towel, shoes & snack shop money.

\*\*Primary Day & Sports camps run Monday 11am to 2pm and Tues-Fri 10am to 2pm\*\*

# Pricing

**FAMILY CAMP:** (registration form online)

Tent: \$360—RV w/ Hookups: \$390

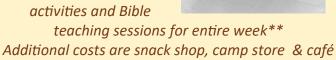
Cabin (sleeps up to 10): Each adult (18+) - \$190

Child (Ages 5-17) -\$100.00 each

\*Ex: Father + Mother + 1 Child = \$480.00

Maximum Price \$600.00

\*\*Prices include all meals, activities and Bible





[ Sr. High, Junior, Jr. High ]

**Full Price:** \$280.00

Postmarked by May 1st: \$260.00 Postmarked by June 1st: \$270.00

\*\*NO early pay discounts on

any Day Camps\*\*

PRIMARY DAY CAMP: (Lunch provided each day)

Week (Mon-Fri): \$100.00 (\$20/day)



SRBC accepts: **CASH & CHECKS** (\$20 NSF fee)

\*\*working on taking electronic payments\*\*



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Day Camps (P Sr. High Camp			ades) - \$100/we	ек (\$20/da	у)	
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Campers are encouraged to stay the entire week of camp except for sickness or emergencies. SRBC reserves the right to set standards of conduct for all campers. Those who violate these standards may be subject to immediate dismissal at parent's expense. Please pay attention to dress code standards (page 2) when packing your child for camp. Please see NEW cell phone policy on page 1 and talk to your child about this cell phone policy adopted by

### **SLIPPERY ROCK BAPTIST CAMP WAIVER:**

**Family Physician** 

### A PARENT OR LEGAL GUARDIAN MUST SIGN THE FOLLOWING PERMIT:

To the best of my knowledge, this Health History and Registration information is accurate. I am in favor of and grant permissions for the child on this form to attend Slippery Rock Baptist Camp and to participate in all camp activities unless otherwise specified. As a parent or legal guardian, I accept the conditions stated, including the release of Slippery Rock Baptist Camp from liability in the case of injury or illness.

I hereby grant permission to the hospital and the medical personnel selected by the director of SRBC, or his designate, to order treatment for my child in the event that I cannot be reached by the director or his designate. I grant permission for the director of SRBC, or his designate, to render whatever emergency treatment may be judged necessary, to hospitalize and secure proper treatment for the child named on this application. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes:

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Signature:			Date:			
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Phone #