

**9th Annual FCA Running Camp**

*The FCA Running Camp is a fun-filled weekend of team bonding, running, swimming, Ultimate Frisbee, games, fishing, music, and spiritual growth. The purpose of the weekend is to gel as a team and to grow as individuals, as we celebrate the love of Christ and grow closer to God’s purpose in our lives. Please note that this camp is completely voluntary, but I encourage everyone to attend. The camp is the single best part of our Cross-Country program.*

**When and Where:** This year’s camp will be held at Red Top Mtn. State Park (50 Lodge Rd SE, Cartersville, GA 30121). We will depart from HHS at 11:00 AM on Friday, July 19th and will return to HHS around 1:00 PM on Sunday, July 21st.

**What to Bring:** Bible, tent, sleeping bag or blankets, pillow, insect repellant, enough clothes for three active and warm days, running apparel for two days of running, swimsuit, sunscreen, socks, running shoes, several towels, toiletries (soap, shampoo, toothbrush, DEODORANT, etc.), rain poncho/jacket, shower shoes, a small box/bag of your favorite cereal, a pen or pencil, and a flashlight.

**Cost:** The cost of the trip is **$45 per runner**, which is due no later than Tuesday, 7/16/18. This covers all meals, campsite rental, swimming fee, canoe rental fee, plates, cups, water, etc. Checks should be made payable to Heritage XC Boosters. Cash should be placed in a sealed envelope, with your son or daughter’s name written on the outside. If possible, deliver payment our booster club president (Tina Burchard).

**Transportation/Chaperones/Camping Arrangements/Gear:** Students may not drive to or from camp. Parent volunteers will transport athletes. One or two adult chaperones will be stationed in each campsite. Female and male campsites will, of course, be separate. If you are willing and able to chaperone, transport students to or from camp, grocery shop, or loan us a tent, we could really use your help. It’s a large task to monitor and feed so many teenagers, and without volunteers, it gets a little overwhelming. We could really use a mom or two to help with food prep.

**I promise to take good care of your kids and will treat them as if they were my own. If you have questions about the FCA Running Camp, feel free to text or call me at 423-987-6165.**

**Thanks,**

**Coach Wynne**

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*Please detach and submit to Coach Wynne ASAP*

**Parent/Guardian Consent:**

I give my son or daughter permission to attend the 2019 FCA Running Camp, which will be held on July 19th-21st, 2019. By signing below, I understand that my child will be participating in physical activity that could result in injury. I agree not to hold Heritage High School, Catoosa County Schools or the Cross-Country coaching staff liable for accidental injury. Please place this slip, along with the $45 payment, in a sealed envelope. Write your child’s name on the outside of the envelope and turn it in NO LATER than 7/16/19.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medical Conditions/Medications: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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