## Rev. David Johnson 185 Springfield Estates Drive Rileyville, VA 22650

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#### 2nd March 2013

Dear friends.

Just a wee note to let you know that because of my health I am no longer able to continue as Camp Director.

We had a camp committee meeting and it was agreed unanimously to ask Mrs. Laura Kennedy to take over this position and she graciously agreed.

Mrs. Kay Case will continue as Camp Treasurer and between them they will carry out the secretarial duties and Mrs. Kennedy will head up the actual day to day running of the camp.

Mrs. Carolyn Gochenour has agreed to continue as Camp Cook and with our teaching staff remaining intact, God willing, the camp will continue to minister to children and teenagers.

I would ask and covet your prayers for the continuance of the camp. We have been blessed to experience the smile of God over the years. Pray that God will continue to bless as you make plans to attend this year.

Every blessing

Pastor Dave

### Lorrie Kennedy, Camp Director

Kay S. Case, Camp Treasurer 23 Canaan Street Luray, Virginia 22835 March 4, 2013

### Dear Pastor/Youth Leader:

Guess what? Spring is right around the corner and you know what that means, Camp is not very far off. So-o-o-o enclosed is your registration forms for our SBCV camps for this year. The Children's Camp is scheduled for the week of July  $15-20^{\text{th}}$ . The Youth Camp will be the following week, July  $22-27^{\text{th}}$ .

We would appreciate having your registration forms returned as early as possible. If not the names, numbers would be a tremendous help, as we need to order materials, etc. in the near future.

All churches need to make sure that all their counselors have background checks. Please have copies with them to turn in at camp. If background check forms are needed see attached form.

We are looking forward to our camps again this year and hope to see you there If you have any questions please call Lorrie at (540) 845-9959.

Every Blessing,

Lorrie Kennedy

Camp Director

LK/kc

# Background Check Consent Form

Name				
First		Middle	Last	Maiden
Race	_ Sex	Date of Birth	Social Security #	
Signature			Date	
		Background Ch	eck Consent Form	
First		Middle	Last	Maiden
Race	Sex	Date of Birth	Social Security #	<u> </u>
Signature			Date	
		Background Ch	eck Consent Form	
First		Middle	Last	Maiden
Race	Sex	Date of Birth		
Signature			Date	