

**MEDICAL EMERGENCY FORM**

Must complete one for each child under 18 – optional for adults.

Name \_\_\_\_\_ Age \_\_\_\_\_

Can participate in full physical activity?

Yes \_\_\_\_\_ No \_\_\_\_\_

Date of last tetanus shot: \_\_\_\_\_

Please comment on any behavioral or health issues (including allergies) that would help the children’s program leaders:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In event of emergency call:

Name \_\_\_\_\_

Phone \_\_\_\_\_

If above cannot be reached please use your best judgment – includes permission to authorize medical treatment or surgery if necessary.

Other –Specify \_\_\_\_\_

Health Insurance Company \_\_\_\_\_

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

Phone Number \_\_\_\_\_

**SPONSOR INFORMATION:** Required for those under18 attending without parent(s). Sponsor’s Name \_\_\_\_\_

Monthly Meeting \_\_\_\_\_

***It is understood that the sponsor acts in loco parentis.***

**Parent/Guardian Signature:**

\_\_\_\_\_

Date \_\_\_\_\_

**Adult/Intergenerational Program:**

We are currently living in a time when the government and many individuals are seeking to further tax cuts funded by significant reductions in support for social responsibility causes including education, disaster relief, food assistance, medical assistance, refugees, peacemaking, and the environment/global climate instability. This runs counter to the common Quaker testimonies of Simplicity, Peace, Integrity, Community, Equality, and Stewardship (SPICES). We will work on how we can support those in our communities who still seek to act in socially responsible ways. This includes how we act ourselves to identify, celebrate and support causes, community leaders, and companies. Friday evening we will have a Getting to Know Each Other activity. Saturday morning’s workshop will speak to the theme. Sunday morning’s activity will be “Making Your Own Plans for Social Responsibility”.

This intergenerational program will also be attended by the ILYM high school friends (HSF) teens (8<sup>th</sup>-12<sup>th</sup> graders).

**High School Friends** will attend adult programming.

**Children’s Program:** Diane Clark Dennis and Choz Howard-McKinney will lead the Wee Friends through 7<sup>th</sup> grade program. They will attend the Saturday evening intergenerational program and will do activities related to the theme at children’s program times.

**Program & Registration for the Blue River Quarterly Meeting**

**of Illinois Yearly Meeting  
April 11 – 13, 2025**

**How do we seek to support social responsibility in trying times?**



**Facilitators: Mike and Jasmine Dennis**

Held at: **Camp CILCA: Central Illinois Lutheran Camp Association.** Camp CILCA’s 210-acre wooded campus lies 12 miles SE of New Salem State Park, 7 miles N of Springfield on route 29, and 4 miles W on Andrew Road (Cantrall Creek Rd). From I-55, take Exit #105 (Sherman) and travel S to the first traffic light, turn right (W) and go 7.5 miles to camp. See [www.cilca.org](http://www.cilca.org) for a map, Google 4124 Camp CILCA Rd, Cantrall, IL 62625 or call (217) 487- 7497.

**BRQ Clerk: Beth Carpenter  
BRQ Recording Clerk: Dale Gardner**

**BRQ SCHEDULE**

**Friday, April 11th**

5:00 – 7:00 Registration/Brown Bag Supper  
 7:30 – 9:00 Getting to Know Each Other Activity

**Saturday, April 12th**

7:15 – Early Worship  
 8:00 – Breakfast (Please arrive on time)  
 9:00 – 11:00 Adult & HSF Program  
 9:00 – 11:45 – Children’s program  
 11:15 - 11:45 - ILYM Planning  
 Noon – Lunch (Please arrive on time)  
 1:00 – 3:00 - Free Time  
 3:00 – 5:00 – Children’s Program  
 3:15 – 4:45 - BRQ Business (Please bring State of Society Reports)  
 5:00 – 5:30 – Young Friends will come to share their experiences  
 5:30 – Dinner (Please arrive on time)  
 7:00 – 8:00 – Intergenerational Activity  
 8:00 – Bonfire with singing & S'mores

**Sunday, April 13th**

8:00 – Breakfast (Please arrive on time)  
 9:00 – 10:15 – Adult Program  
 9:00 – 11:15 – Children’s Program  
 10:30 – 11:30 - Meeting for Worship  
 11:15 – Younger Children join Worship  
 12:00 – Lunch (Please arrive on time)  
 1:00 – Clean up and goodbyes

All meals and adult and intergenerational programs/meetings will be in the Christian Growth Center [CGC]. Youth programs will be in the Retreat Center during adult program times.

**Parents are responsible for their children at all times other than during adult programs.**

**Volunteer Signup:** Friends who are able are encouraged to sign up for volunteer activities (assisting children’s program, Sunday cleanup, etc.) at on-site registration.

**Bring or send a medical emergency form for each person under 18!**

**This year only the housing at Camp CILCA will be free!**

**Housing:** Christian Growth Center (CGC) has 14 bedrooms with 1 double bed & 1 set of bunk beds, with a bathroom. Bedding and towels provided. Depending on registration numbers rooms may be shared. Priority will be given to those with a need. Let us know if you have special needs or roommate preferences.

**Retreat Center** has Men's Dorm & Women's Dorm, and a half-bath on the first floor, and shower/bathrooms in the basement. *Bring your own bedding.*

There are **cabins** (sleep 8-12 each) with heat and A/C but no running water. Shared public restrooms are nearby. Please indicate if willing to share. *Bring your own bedding.*

**Tent Camping and RV camping** are also available.

**Meal Costs:** \$10 per meal. BRQ absorbs all costs of participants under age 19. Please donate as you can to cover them. All meals will be in the Christian Growth Center.

**Alternative Meals:** If anyone wishes to prepare their own meals in the Retreat Center, we have use of the small kitchen with stove, fridge, and dishes.

**Registration:**

Please send by **March 27** to Margie Haworth-Davis, [margiehd8@hotmail.com](mailto:margiehd8@hotmail.com), OR 43 CR 2150N, Mahomet, IL 61853

**Make checks payable to Blue River Quarterly.**

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**Possible Things to Bring:** Snacks to share, flashlights, hiking shoes, towel, fishing pole & tackle, organization displays, games and toys, musical instruments, and copies of music (especially Rise Up Singing), a sense of humor, a modicum of patience, and love to share.

**REGISTRATION FORM**

Family Names: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Monthly Meeting: \_\_\_\_\_

Date & Time Arriving: \_\_\_\_\_

Date & Time Departing: \_\_\_\_\_

Special Needs: \_\_\_\_\_

**\* Please indicate: CGC, Men’s Dorm, Women’s Dorm, Cabin, Tent, RV, or HSD.**

Name	Age	Housing*

Willing to share? Y N

Roommate? \_\_\_\_\_

Nights in CGC x # room x \$75= FREE

Nights in Dorm x # adults x \$20= FREE

Other housing (\_\_\_\_\_) = FREE

Adult Breakfasts x # adults x \$10= \_\_\_\_\_

Adult Lunches x # adults x \$10= \_\_\_\_\_

Adult Dinners x # adults x \$10= \_\_\_\_\_

Registration\* x # adults \$15-30= \_\_\_\_\_

Other Donations \_\_\_\_\_

Total included \_\_\_\_\_

*\*Registration is \$15 to 30 per adult on a sliding scale. No one should hesitate to attend because of financial reasons. Please just pay the amount you can afford, and join us.*