

2023 BILL RICE RANCH



FAMILY CAMP

The *Perfect* Family Vacation

Week I

July 3-7 (Mon.-Fri.)

Pete Rice & Randy Miller
Wil Rice IV & Bill Rice III

- ▶ **Helpful Bible Preaching**
- ▶ **Affordable Vacation**
- ▶ **Delicious Buffet-style Meals**
- ▶ **Trail Rides & Cowboy Cookouts**

Week II

July 31-August 4 (Mon.-Fri.)

Don Strange & Nathan Barker
Wil Rice IV & Bill Rice III

- ▶ **Fireworks Display (Week I)**
- ▶ **Swimming Pool**
- ▶ **Fun Family Rodeo**
- ▶ **Exciting Activities for All Ages**

All this on a 1,300 acre ranch
in the Cumberland foothills of Middle Tennessee.
That's **Family Camp** at the Bill Rice Ranch!

Costs & Accommodations

Standard Room Air-conditioned. Bunk beds. Private bath. Bring own linens or rent from us.

1 person \$285 4 people \$900
2 people \$525 5 people \$1,040
3 people \$745 Additional people \$130 ea.

Room rates include meals and registration fee (\$35 per person). Children 7 years and under pay only the \$35 registration fee.

Deluxe Room Air-conditioned and carpeted. Double bed and bunk bed. Private bath. Linens provided.

1 person \$425 4 people \$945
2 people \$680 5 people \$1,055
3 people \$815 5 person limit

Campsites \$50 per night plus \$35 registration fee per person. Electric, water, sewer hook-ups available. Meals are extra.

NOTE: Credit Cards will be charged a 2% surcharge fee.



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FAMILY CAMP

Check one:

- Family Wk I
 Family Wk II

Registration Form

Office Use Only

Fees _____ Bal. _____

Date _____ ID# _____

Standard Room Deluxe Room Campsite

Please list children

Name _____ Birthdate _____

Send Registration Form & Fee to Bill Rice Ranch · 627 Bill Rice Ranch Road · Murfreesboro, TN 37128

Please print and complete all sections with camper information.

(Circle One)

Mr. _____ Birthdate ____ / ____ / ____

Mrs., Miss _____ Birthdate ____ / ____ / ____

Address _____

City/State/Zip _____

E-mail Address _____

Phone (____) _____

Name of Church Group (if applicable) _____

City/State _____

I agree to abide by all camp rules and will assume full responsibility for my physical welfare and will not hold the Bill Rice Ranch liable in case of sickness or accident.

Camper's Signature _____ Date _____

General Information for Family Weeks

Services: You will hear excellent Bible preaching each day along with helpful Family Seminars addressing specific needs in the home. Enjoy beautiful music that will bless and encourage. This week is a time for fun and spiritual growth bringing your family closer to God and to each other. Nurseries and classes will be provided for your children (infants - 12 yrs.).

Activities: The Bill Rice Ranch has 1,300 acres which provide for many activities for all ages of Family Campers. You will enjoy trail rides on our well-trained horses, pony rides for the little ones, hikes, putt-putt golf, torpedo ball, a game room, ping-pong, ball games, the Outback Obstacle Course, funspiration, and more.

There will be a camper-participation rodeo for the entire family. No bucking broncos—just lots of fun for all ages. There will be pig chases, horse mounts, sack races and more! Activities will be well-supervised, and there is always something for everyone to enjoy.

Arrival: Family camp begins Monday afternoon with check-in starting at 2 PM. The first meal is served at 5:30 PM; the first service is at 7:30 PM. The camp week ends after the last service Friday evening. Plan to leave by 8 AM Saturday morning.

Location: Two miles from Hwy 840, exit 47—Almaville Road. Hwy 840 travels around the south-east side of Nashville connecting I-40, I-24, and I-65. Head south after exiting 840, and Almaville Road will end at Hwy 96. Turn left to go east, and the entrance to the Ranch will be on the south side in one mile.

What to Bring:

Bedding: For standard accommodations, bring your own or rent from us. We have sheets, blankets, pillows, washcloths, and towels. Deluxe room accommodations provide bedding and towels, etc.

Men/Boys: Bring casual clothes for activities and services. Jeans and windpants are fine, but no shorts, please.

Women/Girls: Bring skirts, dresses, and culottes/athletic wear of proper length (knee-length) and fullness. No shorts, pants, capris, or cut-offs, please. Also, no two-piece swimsuits, unless the top and bottom overlap.

You may want to bring money for: cowboy cookouts (\$17), trail rides (\$8), Wild Frontier (\$14), or more for souvenirs, books, snacks, etc.

Reservations: In order to reserve a place on the Ranch, send attached registration form with the registration fee. Write or phone the Registrar for additional registration forms or information.

Bill Rice Ranch
627 Bill Rice Ranch Road
Murfreesboro, TN 37128
registration@billriceranch.org

Early reservations assure you a place at camp. Registration fees cannot be refunded or applied to camp fees, but they are transferable to other campers as registration fees.

Go online billriceranch.org  or call **1.800.253.RICE x125** 

Medical & Insurance Info

This section must be completed by an adult for registration to be finalized. Personal or church insurance will be primary, and the Bill Rice Ranch will provide excess coverage.

Insurance Company: _____

ID Number: _____

Group/Policy Number: _____

Name of Policy Holder: _____

Birthdate of Policy Holder: ____/____/____

We are not covered by insurance.

Please check the appropriate box/boxes and indicate to which family member the information applies: (This will be kept confidential)

- | | |
|---|--|
| <input type="checkbox"/> Diabetes/Hypoglycemia (sugar problems) | <input type="checkbox"/> Thyroid problems |
| <input type="checkbox"/> Heart condition/problems | <input type="checkbox"/> Lupus |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> High blood pressure |
| <input type="checkbox"/> Environmental Allergies | <input type="checkbox"/> Asthma |
| <input type="checkbox"/> Problems with heat | |
| <input type="checkbox"/> Drug Allergies, please list: _____ | |
| _____ | |
| _____ | |
| <input type="checkbox"/> Food Allergies, please list: _____ | |
| _____ | |
| _____ | |

If camper has ever had allergic reaction requiring EMERGENCY action, please explain: _____

Other, please list: _____

Date of last tetanus shot: _____

Medications taken on a regular basis, please list name of medicine and dose: _____

NOTE: Anyone requiring special dietary foods **MUST** bring their own foodstuffs if a supplement beyond regular meal is required.

CONSENT FORM

Parents/guardians must sign if campers are younger than 18 years old:

I hereby give permission for my child/dependent to take part in all Ranch activities including sports and horse-back riding (unless otherwise indicated) and absolve the Ranch from liability to me or my child because of any injury received while attending camp at the Bill Rice Ranch. In case of any accident or serious illness, I hereby authorize the Ranch to call upon a physician of their choice and to follow his instructions. If emergency treatment or hospitalization is required, I request the Ranch to notify me. I give my consent to the Ranch to include picture, video, or other likenesses of myself or my children in promotional materials.

Father/Mother _____

Emergency #s (____) _____
(____) _____

