WARM BEACH FALL RETREATS 2017

OLD IS GONE, NEW IS HERE.

Join hundreds of students from all over the Northwest to connect and grow in your relationship with God and others, meet new people, and have fun together. Experience dynamic speakers, energetic music, exciting activities, and great food. Therefore, if anyone is in Christ, the new creation has come: The old has gone, the new is here!

2 Corinthians 5:17 NIV

reborn

WARM BEACH FALL RETREAT

SENIOR HIGH RETREAT Nov. 10-12, 2017

JUNIOR HIGH RETREAT Oct. 27-29, 2017



SPEAKER Alicia Wilson Baker International Child Care Ministries



SPEAKER

Mike Wilson Senior Pastor Sage Hill Church

WORSHIP West Coast Worship Bellingham, WA

WEEKEND HIGHLIGHTS

Archery Tag / Zip-line / Epic Late Night Games / Climbing Tower

More information: www.WarmBeach.com/fallretreats

REGISTRATION

Student Cost: \$125 per person Early Bird | After Early Bird \$145 per person

- **IMPORTANT! Register with your group.** Give payment and registration form to your youth pastor/group leader.
- Written and signed registration form is required for everyone. All medications must be presented in its original container to the camp nurse at check in. The nurse will administer medications at the appropriate times for students attending the retreat.
- Need a scholarship? Talk with your Pastor. Church groups should bring appropriate leadership and volunteer counselors.

WHAT TO BRING

Pillow/bed linens or sleeping bag for a single bed Casual clothing Warm coat/jacket Bible and pen Towels/Washcloths Personal toiletry items

What Not to Bring

Fireworks Guns/Knives Alcohol/Drugs Tobacco products

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Worship

Troy Smith Sage Hills Church

2017 FALL RETREATS		Registration Form
Give the completed/signed registration for	orm to your Youth Pastor/Church.	
Participant Name		
Mailing Address	Primary Phone	
	State/Prov	Zip
Email Address	Home Church	
Please mark the appropriate choice		Office Use Only
Make payment to your Youth Pastor/Gro October 27-29, 2017 Jr High (BEFORE 10.4) \$125 Jr. High (AFTER 10.4) \$145 Registration Closes 10.18 Name of Church Group	High School (AFTER 10.18) \$145 Registration Closes 11.1	Date House Code ENT DISC
Total Amount \$	Check #	MIP
MEDICAL INFORMATION		
	bed medications, allergies, reactions (bee stings, etc. Please explain:	
Immunizations: Is participant up to da	te on immunizations? Yes No Date of last te	etanus shot//

Consent for Medical Treatment: I give permission for the Warm Beach Camp staff or volunteer nurse to follow the physician's standing orders for
care and treatment of my child. I give permission to the physician selected by Warm Beach Camp to provide emergency medical treatment for my
child and to transport them to an emergency center for treatment. I understand that this emergency care may require the physician to hospitalize,
secure proper treatment for, and to order injections, anesthesia, or surgery for the camper named on this form. I understand that every effort will be
made to notify the parent or quardian of the camper when medical attention is required at a hospital or clinic.

Name of insurance company _____ Insurance ID # _____

Insurance: I understand that Warm Beach Camp does not provide any primary accident or health insurance for campers and guests and further understand it is my responsibility to provide such coverage.

Release/Participation: I am the parent or guardian of the participant. I give permission for my child to participate in Warm Beach Camp activities including transportation. These may include field games, canoeing, climbing tower, and high ropes course, and horseback riding. While Warm Beach Camp will provide for adequate and reasonable participant safety, I understand that accidents can happen at anytime. I am not relying upon Warm Beach Camp to list all possible risks. Therefore, in exchange for Warm Beach Camp allowing my child to participate in camp activities, I understand and expressly acknowledge that I release Warm Beach Camp, its employees, board of directors, volunteers, or guests from all liability for any injury, loss or damage connected in any way whatsoever to participation in Warm Beach Camp activities whether on or off Warm Beach Camp's premises and including transportation. I understand that this release includes any claims based on negligence, action or inaction of Warm Beach Camp, its employees, board of directors, volunteers, volunteers, or guests.

Property Loss: Warm Beach Camp is not responsible for personal property lost, damaged or stolen while using Warm Beach Camp facilities, including parking lots, or participating in Warm Beach Camp programs.

Photograph Permission: I give permission for Warm Beach Camp to use, without limitations or obligation, photographs, film footage or tape recordings which may include my child's image, voice, or artwork for the purposes of promoting or interpreting Warm Beach Camp's programs.

Date:	Participant's Name		
Parent/Guardian's Signature:		Phone #:	
Alternate phone #'s:			
Emergency Contact:	Relationship:	Phone #:	
🕅 Warm Beach Camp 20800 Marine Dr. Stanwood WA 98282 800 228 6724 www.WarmBeach.com			

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