



# FALL YOUTH RETREAT 2019 REGISTRATION FORM

due with payment by Sun. Sep. 29

**Location:** The Ezra Institute for Contemporary Christianity (EICC)

76 Ridge Rd W, Grimsby, ON L3M 4E7

**Cost:** \$80 per person (or \$150/two siblings; \$200/three)

**Depart:** Friday, October 4 – 5:00 PM (arrive to church @ 4:30 to pack van)

**Arrive back:** Sunday, October 6 – approx. 3:30 PM

**Transportation:** *If some parents are able to drive that would be a great help. We will rent at least one 12-passenger van for the weekend, which will depart from Westminster Chapel. Please arrive by 4:30 to pack the van. If you can offer a ride, or need a ride, email: [joshua.martin@westminsterchapel.ca](mailto:joshua.martin@westminsterchapel.ca)*

## Personal Information

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ M F

Email address: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Do you have allergies to any medications? Y N

If yes, specify: \_\_\_\_\_

Student OHIP #: \_\_\_\_\_

Do you have any health conditions we should know about? Y N

If yes, specify: \_\_\_\_\_

## Emergency Contact Information

Home Phone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

Alternate Contact's Name: \_\_\_\_\_

Relation to Student: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

Please read the following carefully:

I AGREE TO RELEASE Westminster Chapel at High Park and its staff and volunteer workers from liability for injury, death and property loss and damage that results from participation in the above named activity. I also AUTHORIZE the administration of first-aid in the case of an injury, and transportation to a medical facility at my expense if deemed necessary.

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Signature (Parent/Guardian if student under 18 yrs.)

## Community Statement

To be read and signed by both student and parent/guardian

In order to foster the best possible environment for everyone attending the Westminster Chapel at High Park youth fall retreat, I will endeavor to act in a way that will glorify my Father in heaven. I will be engaged in all group activities and actively involved in all worship/teaching sessions. I will respect the authority of all camp rules and retreat volunteers, and will encourage those around in a spirit of Christian love. I understand that if I am habitually found breaking the rules of the retreat as determined by camp/church staff and volunteers, my parents may be called to drive to the retreat site and take me home.

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Student Signature

Date

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Parent/Guardian Signature

Date

# Youth Retreat Packing List:

- Bible
- Pen/Notebook
- Sleeping Bag/Linens and Pillow
- Toiletries - Towel, shampoo, soap, brush, toothbrush and toothpaste
- Flashlight
- Long pants, sweat shirts, shorts, t-shirts, socks, swimsuit, running/hiking shoes, flip flops, etc.
- Outdoor Clothes (seasonally appropriate)
- Indoor shoes
- Water Bottle
- Games/Board Games (Optional)

*Do **not** pack the following (these items will be confiscated for the duration of the retreat):*

Cell phones

iPods/iPads/Tablets

Food containing nuts

Computer or video-game device

Fireworks/lighters/weapons of any kind

Chewing gum