



So glad you have decided to participate in Fall Retreat this year. Please fill out all required paperwork and turn into leaders as soon as possible. Cost: **\$40 per student** (Cover hospitality, transportation and meals provided by the camp). A notary will be provided the day of our departure November 3<sup>rd</sup>!

Please feel free to ask Lauren or Jordan any questions you might have on behalf of your student!

**Location:** Cho – Yeh Camp Conference Center. Livingston, Tx

See you later!

-Lauren and Jordan Trapp

## Fall Retreat Student Agreement

Dear Students,

We are so excited you have decided to go with us to Fall Retreat this year! Please remember we are going to have a ton fun and experience what God is going to do in us, but in order to be a part of this awesome event you must agree to our terms. Please read the following statement then have you and a parent/guardian sign below in the showing of your consent of what you have read:

**I \_\_\_\_\_, will follow the instructions that the leaders appointed have asked of me. I will treat them with high respect even if I don't agree with them. I will show up on time at the designated scheduled places and always remain with a group of three during free-time. I will not bring any kind of weapon or anything illegal. I will not be a distraction to others or to myself at all times on the trip. I understand that this agreement is for my own well-being and protection and completely agree to this Statment.**

**Student\_\_\_\_\_Parent/Guardian\_\_\_\_\_**

**Date: \_\_\_\_\_ Date: \_\_\_\_\_**

We trust you to do the right things while you are on this trip, but in case anybody decides otherwise please keep in mind there is no tolerance for going against what you have agreed upon. **Consequences mean you will be sent home and your parent/ guardian will have to come get you.** We want everyone to enjoy fall retreat this year so be ready to answer the challenge of "What Grounds do you live on?" and have a tremendously fun experience!



ACTIVITY REGISTRATION

Release of Liability

21825 Bridgestone Lane
Spring TX 77388
(832) 326-7292

NO CHILD UNDER THE AGE OF 17 CAN BE LEFT ON PREMISES WITHOUT PARENTAL OR ADULT SUPERVISION.

Name of Adult Supervisor: Address:

City: Zip: Main Phone#

Participant's Name: Address:

City: Zip: Main Phone #

Age: Grade Completed: School Name:

Parent or Guardian: Work #

Cell#: Participating in what activity:

Person to contact in case of an emergency: Emergency Phone #:

HEALTH INFORMATION:

Medication: Dosage: Allergies:

Doctor's Name: Phone#:

INSURANCE INFORMATION:

Insurance Company Name: Group #: Policy #:

PARENTAL AGREEMENT: My child has my permission to permission to participate in the above mentioned activity with Spring Baptist Church. In case of an accident or sudden illness to my child, and in the event I cannot be contacted, I hereby authorize the person in charge to refer my child to the above mentioned physician or to another doctor for treatment.

I Spring Baptist Church of any and all claims, liabilities of any nature, individually or collectively, from accidents that occur while my child is taking part in the above mentioned activity.

PARENT'S OR GUARDIAN'S SIGNATURE

SIGNED BEFORE ME THIS DAY OF, 20