

Recharge 2019

WORD OF LIFE YOUTH CAMP
OWEN SOUND, ONTARIO



February 15-17, 2019



COST: \$60.00 (each additional student from the same household pays only \$30.00 each)

REGISTRATION DEADLINE
FEBRUARY 6, 2019

RECHARGE is a weekend retreat where we get to spend time together learning about our relationship with God, how to follow Jesus & enjoy Ontario in the beauty of winter!

RECHARGE FUN INCLUDES:

Sledding, Tubing, the Cardboard Sled Race, Exciting Team Competition, Sports (basketball, ball hockey, indoor soccer, dodgeball), Live Music & Drama, Cardiac Grill, Relevant & Impacting Bible Teaching, Ice Cube Challenge (Polar Dip), Awesome Food, And much more!

WHEN: February 15-17, 2019

- **Meet at CBC7:** 2:30pm on Friday, February 15th
- **Pick-up at CBC7:** 5pm on Sunday, February 17th (but check the [Project 2:10 Facebook](#) page on Feb 17th for the exact arrival time)

WHAT TO BRING:

Bible, pen, flashlight, sleeping bag, pillow, clothes for cold outdoor weather, towel, soap, toothbrush, toothpaste, etc. Snacks (optional, peanut-free please).

WHAT NOT TO BRING:

Anything that distracts you from learning & being relational during the weekend.

HOW TO REGISTER:

Get your [Registration Form](#) + [Recharge Permission Form](#)

Cheques payable to "CBC7"

Complete the [Registration Form](#) + [Recharge Permission Form](#) then bring **both forms** + \$\$\$ to:

Andrew Lukas at Youth Group Wednesday nights **OR** Sunday mornings **OR** Church office during regular office hours (please call ahead: 519.225.2580)

EMERGENCY CONTACT NUMBERS:

Andrew Lukas - 226.663.1873

Liz Fawcett - 519.301.6105

Pastor Byron Hand - 519.777.2565

Word of Life Overnight Emergency Number: Josh O'Boyle - 905.922.7823

Owen Sound Hospital: 519.376.2121 (1800 18th St. E., Owen Sound, N4K 5N3)

**Word of Life Bible Institute (office: 519.376.0733)
617796 Grey County Road 18, RR8, Owen Sound, ON, N4K 5W4**

REGISTRATION FORM (Part 1 of 2): AUTHORIZATION & MEDICAL CONSENT FORM
Senior High Winter Retreat: Recharge at Word of Life Youth Camp, February 15-17, 2019

Participant Name: _____

Address: _____

Home Phone #: _____

Date of Birth (DD/MM/YYYY): _____ **Health Card #:** _____

Parents/Guardians:

Name: _____

Phone/Cell #: _____ **Work #:** _____

Name: _____

Phone/Cell #: _____ **Work #:** _____

Emergency Contact:

Name: _____

Phone/Cell #: _____ **Work #:** _____

Medical Information:

Family Doctor: _____ **Dr. Phone #:** _____

Allergies:

Does your child have any physical, emotional, mental, behavioural concerns or limitations that our staff should be aware of? If yes, please explain:

Is your child bringing any medication with him/her? If yes, please list: _____

******Two Signatures Required on Next Page******

REGISTRATION FORM (Part 2 of 2): AGREEMENT

The safety of your child is our primary concern. Precautions will be taken for their well-being and protection. We will attempt to contact parents/guardians as soon as possible and preferably before any medical treatment is given.

I/we, the parents or guardians named above, authorize Andrew Lukas, Liz Fawcett or one of the Community Bible Church Ministry Staff to sign a consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above.

I/we, named above, undertake and agree to indemnify and hold blameless Andrew Lukas, Liz Fawcett, or any youth group volunteers, or the Community Bible Church Ministry Staff, its Pastors and Board of Elders from and against any loss, damage or injury suffered by the participant as a result of being part of the activities of the Community Bible Church as well as of any medical treatment authorized by the supervising individuals representing the church.

I understand the guidelines for this event and will encourage my child to adhere to them.

This consent and authorization is effective for the Recharge at Word of Life Youth Camp retreat (February 16-18, 2018) and includes participation in and travel to and from the event.

1. _____
Parent(s)/Guardian(s) Signature

I understand that this is a church retreat and that certain standards of conduct will be required of participants. I agree to abide by the retreat rules. I agree to demonstrate respect for staff, fellow participants and property at all times. I understand that if I fail to keep my agreement, I may be asked to leave the retreat.

2. _____
Participant (student's) Signature