



High School Retreat Student Registration Packet

\$100

9-12th Grade Students

September 22-24, 2023

Meet at Antrim: **Friday, 5:00 pm** (supper is provided)

Return to Antrim: **Sunday, 2:45 pm**

Registration Due, September 6:

- Antrim BIC Youth Permission Slip
- Antrim BIC Youth 2023 Medical Form (If not already turned in)
- \$100 Student Retreat Fee



24 Kauffman Road East • Chambersburg, PA 17202
Phone 717.375.4658 • Fax 717.375.2044 • www.antrimbic.net

High School Retreat

September 22-24, 2023

The planning team invites YOU to come along as we strive to be on mission in our walk with Jesus. Our desire is to engage you in purposeful study of God's word, challenge you in a spectacular late night games, and entreat you to an element of silence. Come see for yourself what a late September retreat can be like at the Christian Retreat Center in East Waterford, PA!

Speaker: Jana Snyder

Retreat Expectations:

- Stay away from the opposite sex's cabins
- Be present at meal times
- We are cooking our own meals and need your help to serve food and clean up. Please sign up and show up on time
- Be courteous to other groups at camp

What to Bring...

- ✦ Bible, Notebook, Pen
- ✦ Warm Clothing – we will be outdoors a good portion of the weekend.
- ✦ Sweatshirt
- ✦ Closed Toe Shoes for Team Challenge Course
- ✦ Sleeping Bag/blankets/pillow (bunk bed & mattress provided)
- ✦ Toiletries...don't forget your deodorant!! :)
- ✦ Towel & wash cloth
- ✦ Bug spray
- ✦ Flashlight
- ✦ Umbrella
- ✦ Card games, Frisbee, football, etc.

Questions? Contact Brent Hey, 717-360-0780



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Youth Permission and Release Form

I give my child _____
permission to participate in the following Antrim BIC Youth event:
High School Retreat

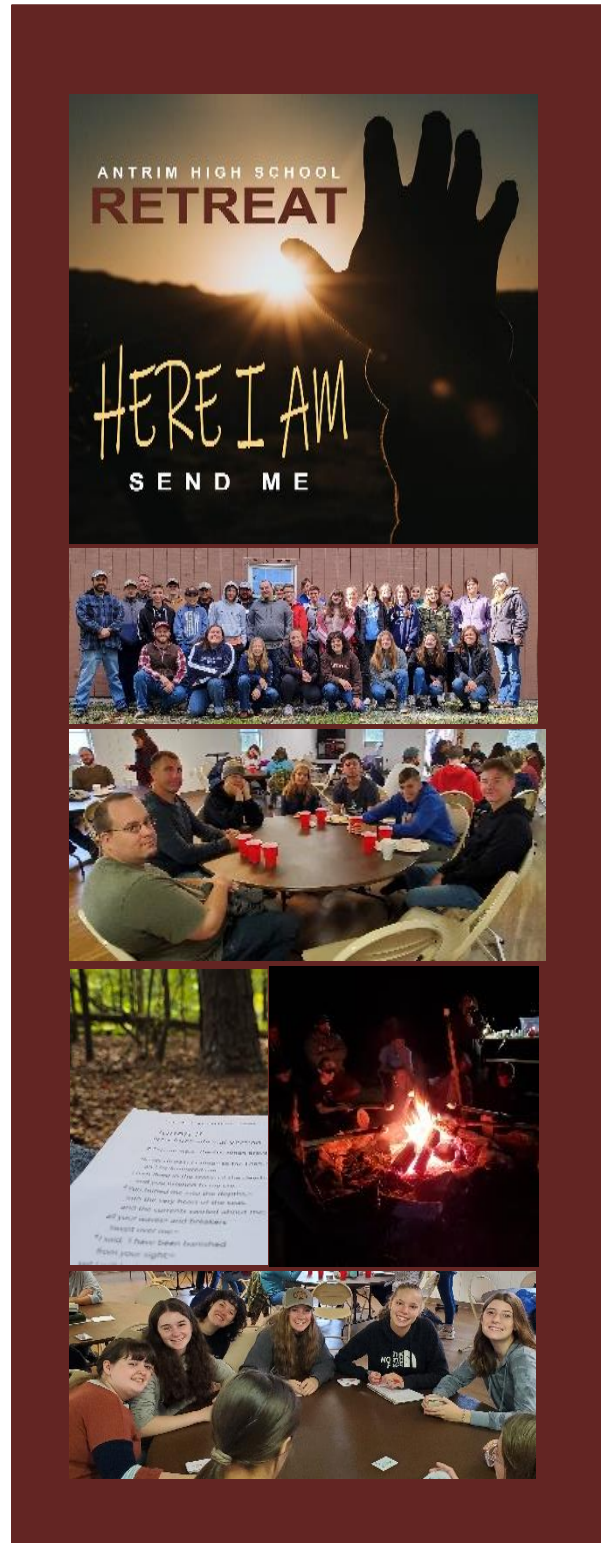
Traveling to: **Christian Retreat Center**
369 CRC Drive, East Waterford, PA 17021

Date: **September 22-24, 2023**
Meet at Antrim: **5:00 pm Friday**
Return to Antrim: **2:45 pm Sunday**

Participation Agreement: I acknowledge that participation in the activity described above involves risk to the participant (and to the participant’s parents or guardians, if the participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, exposure to infectious/communicable disease, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

In consideration for the opportunity to participate in the activity described above, the participant (or parent/guardian if the participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the activity. The participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during the activity or during transportation to and from the activity, as well as for any medical treatment rendered to the participant that is authorized by the sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to as the “activity sponsor”). Further, the participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless the activity sponsor for any injury arising directly or indirectly out of the described activity or transportation to and from the activity, whether such injury arises out of the negligence of the activity sponsor, the participant, or otherwise.

If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the participant (or parent/guardian) and the activity sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution in accordance with the rules of the American Arbitration Association.



Parent/Guardian Signature

Date

Emergency Contact Number

[Check here to use your Fundraising Account to pay your \\$100 retreat fee.](#)
Make checks payable to Antrim BIC Church. Scholarships available upon request.



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2023 Antrim BIC Youth Student Medical Form

Student's Name _____ Age _____ Birthday _____
Last First Middle

Address _____ City _____ State _____ Zip _____

Male Female Student's Contact _____
Cell Phone _____ Email _____

School _____ Year in School _____

Med. Ins. Co. _____ ID # _____ Group # _____

Father _____ Cell _____ Email _____

Mother _____ Cell _____ Email _____

Emergency Contact (after parents) _____ Cell _____

Physician _____ Office Phone _____

Medical History

If necessary, describe in detail the nature and severity of any physical and/or psychological ailment, illness, propensity, weakness, limitation, handicap, disability, or condition to which your child is subject and of which the staff should be aware, and what, if any action of protection is required on account thereof. Submit this notification in writing and attach it to this form. Include name so medication and dosages that must be taken.

Dietary Needs _____ Year of Tetanus Shot _____

Allergies _____

Medications _____

Physical Disorders _____

Activity Restrictions _____

Release and Waiver of Liability:

(Must be signed by participant and parent/legal guardian if participant is minor.)

The undersigned does hereby release, discharge, indemnify and hold harmless Antrim Brethren in Christ Church and all of officers, agent, contractors, directors, members, participants, and employees from all claims, demands, actions, judgments, and/or liabilities of whatsoever kind of nature, including any costs, attorney's fees, losses or expenses in connection therewith, in any way relative to, arising out of, or by reason of, my [minor child's] participation in, and attendance with Antrim Brethren in Christ Church including claims or demands for injury or death to me [minor child], or destruction of any of my property arising out of any accidental or occurrence with, said attendance, participation and/or presence, whether negligent or otherwise.

This waiver, release and indemnification is given in consideration of, and as a condition to, permitting the undersigned to participate in Antrim Brethren in Christ Church Youth Ministry. THE UNDERSIGNED ACKNOWLEDGES THAT HE/SHE HAS READ THE FOLLOWING AND FULLY UNDERSTANDS ALL OF THE FOREGOING. The terms and provisions of this waiver, release, and indemnification shall be binding on the heirs, executors, administrators of the undersigned, and the use of this waiver, release and indemnification in the absence of the signatures signed below, shall constitute acceptance of the terms and conditions herein.

THE UNDERSIGNED expressly acknowledges and agrees that the activities of this ministry involve the potential risk of injury and/or death or property damage. THE UNDERSIGNED further expressly agrees that the foregoing release, waiver and indemnity agreement is intended to be broad and inclusive as permitted by the laws of the Commonwealth of Pennsylvania that if any portion hereof is held invalid, it is agreed that the balance shall, not withstand continue in legal full force and effect.

_____ Date

_____ Student Signature (if over 18)

_____ Signature - parent/legal guardian required regardless of student's age