

Winter Retreat \$13009

March
13-15



\$95

Registration Due: Feb. 22
Registration includes \$55
and a completed
Minor Release Form
(form attached)

THIS IS A TEAM EVENT FOR 9TH-12TH GRADE STUDENTS!

Tons of Winter Fun: Tubing, Ice Skating, Broom Ball, Indoor Rock Climbing, Food, Alaina Bowman, Coffee...need i say more?!?!

WHY?

So we were able to squeeze a retreat in for this year...Yay!!! We were able to secure an inexpensive opportunity with Silver Birch Ranch. So we are very thankful and excited to be able to do this!

WHAT?

Come out and enjoy the beautiful and cold Northern Wisconsin countryside... which hopefully will still have snow...or else we may call it a mudfest.

Alaina Bowman will be the speaker for the weekend and we'll have the youth praise band with us as well.

It should be a great time.

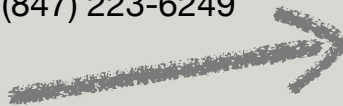
WHEN?

We will be leaving the church at **5pm on Friday** and will be back by **6pm of Sunday night.**

There is a possibility for a late arrival to the retreat. If interested: Please call Cathy Deyle (847) 548-2713

BE THERE!!

RSVP to Chris Brooks
chris@tryfaith.com
or call the church office
(847) 223-6249



Weather Permitting:

Hopefully this will be a winter retreat. If the weather does become un-winterish, we will let you know so you can bring mud gear.

Minor Release Form

Faith Church
of Grayslake

Event: Winter Retreat @ Silver Birch Ranch

Sponsoring Ministry: Student Ministries

Name of Minor: _____ Age: _____

Address: _____

Name of Parent or Guardian: _____

Address: _____

Home Phone: () Business Phone: ()

Emergency Contacts other than parents or guardian:

1. Name: _____ Hm Phone: _____ Wk Phone: _____

2. Name: _____ Hm Phone: _____ Wk Phone: _____

Permission and Release: I give permission for my child to participate in this activity. In the event he/she is injured, I waive and release all rights to claim for damages against the sponsor or its representatives. I further agree that any claim or dispute arising from or related to this agreement shall be settled by mediation and, if necessary, legally binding arbitration, in accordance with the Rules of the Institute for Christian Conciliation; judgement upon an arbitration award may be entered in any court otherwise having jurisdiction.

Medical Release: In the event my child suffers sudden illness, accident or injury and neither parents nor guardians can be contacted, I give my permission for any emergency treatment that is deemed necessary by a licensed physician.

Family Physician: _____ Wk Phone: _____

Medical Insurance Company: _____ Group #: _____

Other Pertinent Medical Information (Diabetes, allergies, etc.)

Signature: _____ Date: _____

This agreement is subject to arbitration pursuant to the Illinois Arbitration Act, Title #5, Chapter 710, Illinois Code Annotated.