

2025 FALL RETREAT REGISTRATION FORM

Please note that the information on this form is for the sole use of the youth leaders and is not available to any other individuals or groups.
This means that we will not disclose any of the following information to another individual without your permission.

Details of Youth

Name: _____ Date of Birth: ____/____/____ Grade (2025/2026) _____

Address: _____

Sex: Male / Female (Circle Appropriate) Email Address: _____

Phone Number: () -

Emergency Contact Details

In the event of an emergency relating to your son/daughter please provide information below which we can use to contact you.

Contact 1: _____ Contact 2: _____

Email: _____ Email: _____

Phone Number: () - Phone Number: () -

Medical Information

Are there any medical conditions (i.e. allergies, epilepsy, asthma, diabetes, travel sickness etc.) which we should be aware of?

Please give any details of special dietary needs we should be aware of (e.g. food allergies)

I, the parent or guardian, give the student permission to attend and participate in the fall retreat at Silver Birch Ranch held October 17th-19th (see pamphlet for more information).

I understand that every care will be taken to ensure the health, safety, and welfare of my student.

I authorize my student to drive with youth leaders and will coordinate with my student to pick up at the church at the end of the event or arrange with them for their own transportation home.

Note: Leaders have all had background checks and our policy is never to have a one-on-one leader student ratio.

Parent/Guardian Name (print) _____

Signature _____ Date ____/____/____



Payment * can be made via cash or check by deadline of October 8th.

Please turn in form and payment to Pastor Seth or by dropping in the offering jar on a Sunday morning.

* \$139 earlybird special rate, \$149 after 9/17 (minus any summer service day scholarships from The Warehouse)