

HISTORY MAKER REGISTRATION FORM

Nicola Valley Evangelical Free Church History Maker Sr. Youth Retreat Form (Gr. 8-12)

Hosted by: Nicola Valley Evangelical Free Church, 1950 Maxwell Ave., Merritt, B.C., V1K 1L9

Event Location: Chilliwak Coliseum, 45323 Hodgins Ave, Chilliwak, B.C. V2P 8G1

Friday, May 22, 2019 - leave from the church @ 4:00pm; Sunday, May 24, 2018 - at church by 3:30pm

The cost for the retreat is \$85 plus enough money to cover 3 meals if paid by Feb 29, 2020. **Prices go up after Feb 29.** If that cost would somehow prevent/prohibit your child's participation in this event, please make a note to that effect on this form or speak to Youth Pastor Anthony. We have individuals who are willing to help those youth who have difficulty raising the funds needed to attend these events.

Please bring the following:

Enough Clothes for 3 days

A couple pairs of shoes

Bible

Medication if needed

Toiletries

Extra Money for Merch/Spending Cash/For Meals

Notepad for Main Sessions/Pen

-----Please Tear Here-----

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Youth Retreat Information Form

Name: _____ Address: _____

Parent Email: _____ Health Card #: _____

Emergency Contact Name & Phone #: _____

Current Medications/Dosage: _____

Food or Drug Allergies: _____

Medical and Legal Release Form

I, the legal parent/guardian, hereby give permission for any and all medical attention to be administered to my child/myself in the event of accident, injury, illness, etc. as deemed necessary by the leaders of this youth retreat. In the event of the necessity of such care or treatment as heretofore described, the undersigned agrees to hold harmless and indemnify Nicola Valley Evangelical Free Church from any acts of malfeasance, and/or failure to act on the part of those chosen to administer medical care on behalf of the participant.

I do hereby release, forever discharge and agree to hold harmless the Nicola Valley Evangelical Free Church from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the participant that occur while said person is participating in the above described retreat.

- Please notify me by phone if my child sustains any minor cuts, bruises, stomach aches or other such injuries. We do have a leader with us certified in first aid and can take care of minor infractions, but if you want to be notified, we will make sure to contact you as soon as possible.

Legal Parent/Guardian Printed Name: _____

Legal Parent/Guardian Signature: _____

Date: _____