

## Parental Consent and Release Form

Student's Name: \_\_\_\_\_ Birthday \_\_\_\_\_ Grade: \_\_\_\_\_

Home Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Father: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Mother: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Other Emergency Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

To Whom It May Concern,

I hereby release Rockford First Assembly, its staff, and sponsors from responsibility for any injuries or illness that my student may sustain during this Cross Current Fall Retreat taking place November 13<sup>th</sup>-15<sup>th</sup>, 2009. In the event of an emergency, I hereby authorize an adult leader of this activity, as an agent of myself, to consent to any X-Ray examination, medical, dental, or surgical diagnosis, treatment, and hospital care advised and supervised by a physician, surgeon, or dentist (as appropriate) licensed to practice under the laws of the state where the services are rendered, either as a doctor's office or in a hospital. I expect to be contacted as soon as possible.

Signature of Parent/Legal Guardian: \_\_\_\_\_

Medical Information:

Allergies: \_\_\_\_\_

Medication being taken: \_\_\_\_\_

Medical Insurance Co.: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Member Name: \_\_\_\_\_

**\* Parents must sign release form for anyone under the age of 18.**

## CC FALL RETREAT November 13-15, 2009

**About:** Do you want to experience the best weekend of your life? Do you want to get closer to your friends, meet new people and encounter God in a whole new way? Then you don't want to miss out on the "John Doe" CC Fall Retreat.

**COST:** The total cost is \$155. Early Bird discounted Price is \$135 – discounted price will be applied if a \$70 down-payment is in by October 7<sup>th</sup>. All money and forms are due by October 28<sup>th</sup>. There is a \$15 late fee for registrations/payments turned in after October 28<sup>th</sup>. Price includes lodging, transportation, production costs, and meals from Friday evening through Sunday afternoon. Checks should be made out to: "**Cross Current**". Registration forms are available and payments can be made at the Fall Retreat table at Cross Current or Student Ministries Offices. You can also **Register/ Pay online** at [www.crosscurrent.cc](http://www.crosscurrent.cc) (3% fee applies to online payments).

**WHEN:** Orientation begins at 5:30pm in the CLS High School Commons on Friday, November 13<sup>th</sup> with departure to Green Lake immediately following.

**EXTRA MONEY:** You may want to bring a little extra money for concessions merchandise, etc. We highly recommend that you do not bring too much money though.

**WHAT TO BRING:** One suitcase per person please!!

- a. **Signed** permission release form as well as Student Covenant form! (These are available at the Retreat table at CC or at the Student Ministries Office.)
- b. Soap, Toothpaste, and Deodorant (Please!!)
- c. Towels, washcloths, pillow, your own bedding...
- d. Alarm clock, flashlight and batteries.
- e. **Bible and Journal** (these will be used in the services and discussion groups all week so you will want to have them with you!)
- f. Make sure to pack some warm clothes it can tend to get chilly at night. You may even want to pack a heavier jacket.
- g. Personal items

**What not to bring:** Please leave all valuables at home including: CD players, iPods, laptops, DVD players, video games, etc... We will not be held liable for lost or stolen items.

**WHAT TO WEAR:** We are pretty casual for the weekend; so do not feel like you need to bring dress clothes.

**Contact Info:** For more information or if you have any questions feel free to e-mail [info@crosscurrent.cc](mailto:info@crosscurrent.cc) or call (815)639-7543. Also, check out Cross Current's website at [www.crosscurrent.cc](http://www.crosscurrent.cc).

***WE RETURN BACK TO ROCKFORD FIRST SUNDAY AROUND 3:00PM. CELL PHONES WILL BE AVAILABLE TO MAKE PHONE CALLS.***

**WHERE ARE WE GOING???**

Green Lake Conference Center  
W2511 State Road 23 Green Lake, WI 54941  
Emergency # (920) 294-3323  
Jeff Frost 815-218-9854 (Emergencies only please)  
Megan Valentine 815-630-0570 (Emergencies only please)

## Student Covenant Form

I understand that due to the nature of this trip I need to be responsible and follow these specific guidelines. I realize my actions may affect the safety and the community of this trip.

### Guidelines:

1. I understand that air-soft guns or shaving cream fights are NOT allowed. I also understand that I need to respect the people and their personal belongings around me.
2. I understand that I need to limit my public display of affection. (PDA)
3. I understand that whatever curfew is given for each night is the one that I must abide by.
4. I understand the need for gender-appropriate sleeping arrangements and I will not at any time enter the room of a person of the opposite sex.
5. I understand the need to be with a chaperone or have them know where I am at all times.
6. I understand that I am not allowed to possess or use tobacco, alcohol or any type of drug at anytime during the retreat.

### Consequence:

- 1-5: These actions will be confronted once and if repeated I understand that I may be sent home at my family's expense.
- 6: These actions will result in being sent home at my family's expense.

### Commitment:

I will follow all of the above guidelines and respect the Green Lake Conference Center Leadership at all times. I understand the consequences if I choose not to follow the rules.

**Student Signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_

I understand all of the guidelines and safety procedures and the potential consequences. I have discussed these guidelines with my student and am confident that he/she will honor these guidelines and the leadership of Cross Current.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_