REGISTRATION **FULL NAME** BIRTHDATE (m/d/yyyy) **GRADE** MALE / FEMALE PARENT EMAIL Are you coming with a friend? If so, what is their full name? Included is my payment via: ☐ Cash ☐ Check # (Make checks payable to Glenwood **Community Church)**

MORE INFORMATION

The Middle School Ministry (6th-8th grade students) meets Sunday mornings at 9:00 am and 10:45 am as well as Wednesday nights at 7:00 pm, both in the Fellowship Hall.

We want to see middle school students whose hearts are warmer towards Christ, actions are more Christ-like, and lives increasingly fulfill Christ's commission.

For more information about the Middle School Ministry, contact Tommy Holczer. He would love to talk with you!

> Tommy Holczer 360-571-3300 tholczer@glenwoodcc.org

glenwood
middle school
youth group



Glenwood Community Church 12201 NE 72nd Ave Vancouver, WA 98686 October 16th – 18th



MS FALL RETREAT!

We are headed back to Eagle Fern Camp! We will be mixing all of our favorite ingredients for a good time: lots of great food... awesome night games... zip line/big swing... Bible studies... worshipping God... late nights with friends!

WHEN IS IT?

Meet at GCC: Fri., Oct. 16th @ 4:00 pm Arriving back: Sun., Oct. 18th @ ~3:00 pm

HOW MUCH IS IT?

\$90

(Scholarships available, contact Tommy Holczer for more information)

DEADLINE TO SIGNUP

Registration & payment: Sun., Oct. 11th

WHAT SHOULD I BRING?

Bible, pen, notebook

Warm clothing (coat, hat, gloves, etc.), sleeping bag, pillow, grubby clothes & shoes (for night games), toiletries (soap, shampoo, deodorant, etc.), towel, flashlight with fresh batteries.

You may also want to bring a camera, football or Frisbee, or card game to play with friends.

Also, <u>bring money for one fast-food meal</u> on the way home.

WHAT SHOULD I NOT BRING?

Please do not bring: any electronic devices such as <u>iPods or cellphones</u>. As well as firearms, illegal drugs, tobacco, alcohol or other controlled substances.



MEDICAL RELEASE FORM

I hereby give my consent for my son/daughter to attend the Middle School Fall Retreat sponsored by Glenwood Community Church from October 16-18, 2015. Unless otherwise noted, I approve of his/her participation in all the activities connected with this retreat, including transportation to and from the camp. I furthermore authorize the official leaders of the retreat to stand in my stead in authorizing needed medical treatment in case of an emergency. Reasonable effort shall be made to contact me prior to the exercise of such authority.

PARENT/GUARDIAN FULL NAME
ADDRESS
PRIMARY CONTACT PHONE
SECONDARY CONTACT NAME
SECONDARY CONTACT PHONE
I agree to use my own medical insurance as primary coverage in the event of any medical treatment
Insurance Carrier:
Policy/Subscriber Number:
Name of Insured:
Allergies and/or medical information: (attach additional information as necessary)
I also recognize that if my child behaves in an inappropriate manner, the leaders of this activity may call and request that I make arrangements for my student to return home at my expense.

PARENT/GUARDIAN SIGNATURE

DATE

Don't miss out!