

fall retreat

Hey! The Fall Youth Retreat is almost here, and it is going to be AWESOME!
It will definitely be a weekend you will never forget.

All the stuff you love about Fall Retreat will be there. It'll be fun, crazy, passionate, deep, wild, a little unexpected, and filled with tons of your friends.

THE facts

We will be meeting at the church Saturday, November 17th at 1:00. We'll return Monday, November 19th at 12:30. The retreat will be at Camp Victory in Cartwright, Oklahoma. The cost of this trip is \$50 which includes everything. All meals and snacks will be provided, so no extra cash is needed.

THINGS to bring use this as a checklist when packing!!!

- Bible** (notice it is bold, italicized, and underlined for emphasis)
- Toiletries (shampoo, soap, tooth brush, stuff like that)
- Warm Sleeping Bag (or bedding) and Pillow
- Flashlight** (seriously, don't forget this one)
- Towels
- Pack warm. It's going to be chilly
 - Bring your warm **jacket**, a **hat**, and **gloves** (some serious warmth)
- Clothes that can be worn in the woods

THINGS NOT to bring

MP3/music players

Cell Phones

Valuables and nice clothes

Leave your electronics at home.

We're going to meet with Jesus, so give your phone a break for the weekend!

--Cameras for pictures are ok! We like pictures! (no you can't use the camera on your phone. No phones.)

If you are not sure, ask!

Any cell phones brought on the trip must be turned in upon departure. They may only be checked out for calling parents. Pastor Jonathan's cell phone will be available for parents to call if there is an emergency. Jonathan's Cell • 817-233-7524

It's going to be a great trip. Get your heart ready and pray that God will do a work in your life.

Turn in the release form and your \$50 ASAP to get signed up. Spots are limited and will be first come first serve. Don't miss out!!!



Amplify Fall Retreat 2018

Activity Release Form

Name of Student: _____ Birthday ____/____/____

Grade: _____ Gender: _____

Address _____

City _____ State _____ Zip _____

Student's Cell (_____) _____ - _____

Parent Name _____

Parent Cell (_____) _____ - _____ Parent work number (_____) _____ - _____

Parent name _____

Parent Cell (_____) _____ - _____ Parent work number (_____) _____ - _____

Emergency Contact (if parent is not available): _____

Emergency Contact number: _____

Please list any allergies or important information we should know about the student:

I, _____ (parent or legal guardian printed name), agree to release Grace Church, its directors, employees, and agents, for any and all liability sustained during the Fall Youth Retreat, November 17-19, 2018, and during travel to and from the event. I hereby give permission for my child to participate fully in the said youth retreat and all activities. I hereby give permission for my child to be taken to a doctor or medical facility and authorize medical treatment if necessary.

(Parent or Guardian's signature)

(Date)