

### 30<sup>TH</sup> ANNUAL GOSPEL RETREAT

June 28 – July 1, 2017

THEME: REDEEMED

### REGISTRATION FORM

Directions: This form can be used for multiple participants, if: (1) The phone and address is the same for each participant and (2) The individual who signs as legal parent or guardian is the same for all participants on the form. If any of this information is different, a separate form is needed. If you are legally responsible for a child that has a different last name, indicate in the first name box below; otherwise everyone listed should have the same last name as listed below.

Last Name: \_\_\_\_\_

Street Address \_\_\_\_\_

Phone Number:(\_\_\_\_) \_\_\_\_\_

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

First Name	Age (Circle One)	Sex M or F?	Shirt Size (See Below)	Water Slide?	
	8 9 10 11 12 13 14 15 16 17 18 19 20s 30s 40 & Up				
	8 9 10 11 12 13 14 15 16 17 18 19 20s 30s 40 & Up				
	8 9 10 11 12 13 14 15 16 17 18 19 20s 30s 40 & Up				
	8 9 10 11 12 13 14 15 16 17 18 19 20s 30s 40 & Up				
	8 9 10 11 12 13 14 15 16 17 18 19 20s 30s 40 & Up				
	8 9 10 11 12 13 14 15 16 17 18 19 20s 30s 40 & Up				

Tee Shirt Sizes: Child-S(C-S), Child-M (C-M), Child-L (C-L), Adult Sizes: S, M, L, XL, XXL, XXXL, XXXXL (When ordering child sizes please place a C in front such as Child-Small is C-S. Otherwise it is assumed that an adult shirt is being ordered).

Adult Participate: Please list one roommate \_\_\_\_\_

**FEE CALCULATION:**

AGE OF PARTICIPANT(S)	FEES	NUMBER OF PARTICIPANTS	TOTAL (FEES TIMES # OF PARTICIPANTS)
8 - 11	\$200		
12 - 17	\$250		
18 & up	\$285		
<b>TOTAL DUE</b>			

Example: 1 Participant is 8, 1 Participate is 10 & 2 Participants are 14. On the 8-11 line, enter 1 attendee. Under total enter \$400 (2 participants times \$400) On the second line enter 2 in the attendees column. In the total column enter \$500 (2 times \$250). On the total due line add: \$400 and \$500. The total due then, is \$900.

**PLEASE READ AND COMPLETE THE BACK OF THIS FORM.**

## AUTHORIZATION FORM

The Mt. Hebron Missionary Baptist Church is sponsoring a religious retreat at Cedar Lake Ministries, 13701 Lauerman Street, Cedar Lake, IN from June 28 – July 1, 2017. I understand this document is an authorization granting the church permission to take the above named individuals to the retreat. Full authority is granted to Mt. Hebron to supervise and instruct the same. I do further agree to indemnify, protect and hold harmless said church, its officers, board members, supervisors, agents, servants, employees and all private persons or organizations to supervise or chaperone minor participants in this retreat excursion while engaged in this retreat (and its activities) including travel to and from, from any claim or liability whatsoever, including but not limited to, personal injury, property damage, court costs, attorneys' fees and interest, however caused, as a result of the minor participating in the religious retreat.

I further agree to pay for all damages caused by the above named individuals to the retreat facility or the bus, as well as any injuries/illnesses sustained by or caused by the same.

I hereby authorize Mt. Hebron Missionary Baptist Church and its designated representatives to obtain reasonable medical care and emergency services in case such circumstance presents itself. I further hold harmless Mt. Hebron and its representatives of any liability due to such medical care and emergency service as provided.

I further agree that Mt. Hebron, its officers, agents, and/or employees reserve the right to terminate the participation of the minor for failure to behave and act in accordance with the church's regulations and instructions on conduct, for failure to follow instructions and directions of the retreat supervisors and/or chaperones, or for any acts of the minor deemed by the board, its officers, agents, and/or employees to be detrimental to or incompatible with the interest, harmony, comfort or welfare of the retreat as a whole. If the participation of the minor is terminated, the minor shall be escorted home at the expense of the parent or guardian. No refunds will be granted.

I further agree Mt. Hebron, its officers, agents and/or employees reserve the right at any time prior to or during the retreat, to make cancellation, changes or substitutions in emergencies or changed conditions or in the interest of the group, and to alter, prior to the retreat departure to meet unexpected changes in fares, hotel rates, etc.

Refund policy: I understand and agree that if Mt. Hebron cancels the retreat for any reason, refunds will be granted. However, if I should have to cancel for any reason, **no refunds will be granted after June 1, 2017.**

Signature of Parent/ Guardian/Participant (if over the age of 21): \_\_\_\_\_

**Emergency Information:**

Name of Individual to contact in emergency: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

