

Advisors:

- Feel free to use and copy the enclosed flyer to promote this event.
- **MONDAY, MARCH 3 registration deadline!**
- Register your whole group using the form on the back
- Our music will be lead by various staff from summer camp that has lead worship in various settings and size groups.
- Send one check made out to the “Calvin Center” for the whole group
- **Make sure you have at least one adult advisor per six youth of the same gender.**
- This year we will open high ropes to all during free-time. This will be on a first come first served basis. And we will put through as many people as we can. This means individuals can participate rather than whole groups. (see release form below)
- The small group handbook will be sent (for you and other leaders in your group) by Tuesday 4th of March so you can digest it.
- **Have your registration postmarked by March 3.** In order to ensure that everyone has adequate housing there will be no late registrations taken.
- Mail your completed registration form and payment to:

**Calvin Center
Attn: High School Retreat
13550 Woolsey Road
Hampton GA 30228**

- Once we receive your registration, we send, call or fax you with confirmation of registration.
- You can download directions to the Calvin Center from www.calvincenter.org
- ***CAMP STARTS AT 9 AM ON SATURDAY 8TH MARCH AND FINSHES ON SUNDAY 9TH MARCH AFTER LUNCH.***

Bring with you to the retreat:

- One medical release for each participant in your group – release forms are located on the back of the information flyer, **Participants MUST have medical release and copy of insurance card to be able to participate in the retreat!**
- High Ropes will be available Saturday afternoon by first come first serve basis. **Participants MUST have a Challenge Course Consent formed filled out and signed by parents before they arrive!! (this form is at the bottom of the Medical Release Form)**
- Bedding, towel, clothing, toiletries, flashlight, and Bible

We look forward to having your group participate with us. Please let us know if we can be of any further assistance.

Paul Humphreys
Program Director
770-946-427X224

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Destiny Williams
Program Assistant
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2008 High School Retreat Medical/High Ropes Release Form

Conferees Name _____

Parent/Guardian _____

Phone: Day () _____ Night () _____ Cell() _____

Alternate Emergency Contact _____

Relationship to conferee: _____

Phone: Day () _____ Night () _____

Name of Physician _____

Phone: () _____

Medications you will bring _____

Health Insurance Company _____

ALL CONFEREES MUST BRING A PHOTOCOPY OF HEALTH INSURANCE CARD!!!

Basic Disclaimer

Reasonable risk-taking is a part of daily living. Operating within the safety parameters and instruction of the facilitator can minimize the reasonable risks present in the *High Ropes Course. Or "The Courses"*

The Presbytery of Greater Atlanta and the Calvin Center Staff cannot assume responsibility for authorized use or misuse of "The Courses".

By signing this form, I agree that I will not hold the Presbytery of Greater Atlanta, The Calvin Center, their agents or employees, responsible for any accident or injury.

To complete the High Ropes Course participants must be at least 12 years of age.

I also give permission for photographs that might be taken to be utilized in the camps promotion in the future.

Parent/Guardian Authorization

In signing this form, I hereby certify that this application and health information is correct. I understand that in case of emergency, every effort will be made to contact me. If I cannot be reached at the numbers supplied, I hereby give permission to the physician selected by the Calvin Center to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for my child, as named herein. I also give permission for the use of photography including my child for Calvin Center and/or Presbytery of Greater Atlanta promotional materials.

Signature of Parent/Guardian:

Date:
