

PLEASE BRING

- **Sleeping Bag, Foamie, Pillow**
- **Bible, Notebook, Pen**
- **Swimsuit & Towels**
- **Earplugs**
- **Toiletries, Medications**
- **Pajamas**
- **Clothes for the weekend**
- **Hoodie/Jacket**
- **Outdoor and Indoor Shoes**
- **Outdoor Clothing, Footwear**
- **Water Bottle**

PROHIBITED ITEMS

Possession of alcohol, weapons, illicit drugs, pornography, or energy drinks (of any kind) is grounds for dismissal from the event at the cost of the parent(s) or guardian(s). Thank-you for your help and cooperation as we aim to keep Cochrane Alliance Youth events safe and fun for everybody!

YOUTH



WIN TER RETREAT

MARCH 16-18

REGISTRATION

I/we, the parent(s) or guardian(s) named below authorize Cochrane Alliance Church (CAC) paid or volunteer youth staff to sign a consent for medical treatment, and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the youth named below. I/we, named below, undertake and agree to indemnify and hold blameless the paid or volunteer CAC staff, CAC pastors and Elders Board from and against any loss, damage or injury suffered by any medical treatment authorized by the supervising individuals representing CAC. This consent and authorization is effective only when the youth, named below, is participating in or traveling to/ from events of the Youth Ministry of Cochrane Alliance Church, Calgary, Alberta . I/we also give consent to CAC to use pictures and/or video of this student, if taken while participating in these events, for CAC promotional purposes. In signing this consent form, I/we understand that possession of alcohol, weapons, illicit drugs, pornography or energy drinks (of any kind) by the below named attendee are grounds for the immediate dismissal from the event at cost to us.

Parent/Guardian Name(s): _____

Parent Signature: _____

Student Signature : _____

Date: _____

Youth's Name: _____

Male Female

Grade: _____ DOB (MM/DD/YY): _____

Address: _____

Postal Code: _____

Phone Number(s): _____

Emergency Contact: _____

Emergency Phone: _____

E-mail: _____

I would like to room with: _____

Alberta Health Care Number: _____

DETAILS

Who: Grade 7-12

Friends are Welcome!!

When? March 16-18

Bus Leaves Cochrane Alliance Church March 16th @ 5:30pm.

Pick Up @ Cochrane Alliance Church March 18th @ 12:30pm

Cost: \$125

Includes:

- Transportation
- Meals for the weekend
- Friday Night Stay at the Sheraton Cavalier
- Saturday Night Stay at Kamp Kiwanis
- Bowling @ Cochrane Lanes
- Swimming/Skating @ Westside Rec Center
- Monster Mini Golf
- Amazing Teaching

Payment can be made by cash, cheque, or online

www.cochranealliance.com

****If you require financial assistance please let Jason know so we can help to support you. ****

Questions?

Contact Jason

jasond@ochranealliance.com

403-932-6100 ext 707

Registration Deadline is March 4th