



SPECIAL EVENTS & ACTIVITIES WAIVER

DETAILS OF SPECIAL EVENT/ACTIVITY

Special Event/Activity: Weekend Youth Retreat **Date:** Mar 15, 2019 at 6:30pm – Mar 17, 2019 at 3pm

Location of Special Event/Activity: Southern Alberta Bible Camp **Transportation:** Carefree Express Bus

Description of Event/Activity:

We will be meeting at the church and then bussing out to SABC for a weekend long retreat. There will be times of worship, devotionals, prayer, games, nerf, competitions, a movie, and great food! Early bird deadline is February 3 (\$110) and regular deadline is Feb 24 (\$125).

The Child in this Special Event/Activity will be staying overnight: Yes, for 2 nights

CHILD INFORMATION

Name of Child: _____ (the "Child")

Any requests for who's in their room? (we'll do our best but no guarantees): _____

Does the Child have any dietary allergies, or any other medical concerns or conditions that the Lethbridge First Baptist Church should be aware of (Please list all): _____

Alberta Health Care No: _____

Is your Child on any medication? YES NO (if yes, please answer the following):

Name of medication: _____ **Dosage (how many mg):** _____

Condition(s) being treated: _____

Directions for administration (what time, how many pills, etc):

Any special instructions? (IE must be taken with food, etc)

Please put all medication in a ziploc bag and hand deliver directly to Kyle, who will be overseeing medication during the weekend

PARENT/GUARDIAN INFORMATION

Parent or Guardian Name: _____
(Please check one)

Email: _____

Home Phone Number: _____ Cell Phone Number: _____

***Have you completed the mandatory PARENT/GUARDIAN CONSENT, ACKNOWLEDGEMENT OF RISK, WAIVER, RELEASE & INDEMNITY form: YES NO**

If you as parents/guardians wish to receive updates during the retreat (IE to hear when we arrive, how things are going, when we leave, etc) please text [@yeti19](https://www.instagram.com/yeti19) to (587) 333-6386. You will then receive a text confirming your enrollment. If you don't get a confirmation text or if you run into issues, please talk to Kyle

EMERGENCY CONTACT INFORMATION

Name of Emergency Contact: _____

Home Phone Number: _____ Cell Phone Number: _____

I, the undersigned Parent/Guardian of the Child hereby give my consent to allow the Child to participate in the above described Special Event/Activity. As outlined in the PARENT/GUARDIAN CONSENT, ACKNOWLEDGEMENT OF RISK, WAIVER, RELEASE & INDEMNITY form, **which I have also signed**, I am fully aware and accept the possible risks, danger, and harm that my Child may be exposed to in all events with the Lethbridge First Baptist Church, specifically the aforesaid Special Event/Activity.

Signature of Parent/Guardian

Date