



**March 24-26, 2017**

Leave LHC: Friday at 5:30 p.m.

Return LHC: Sunday at 10:00 a.m.

**Hoblitzelle Camp & Conference Center**

**7<sup>th</sup> – 12<sup>th</sup> Grade**

**Cost: \$110.00**

## Yes, I am attending Spring Retreat!

Student Name: \_\_\_\_\_

Student Grade: \_\_\_\_\_ Student Birthdate: \_\_\_\_\_

### Contact Information

Student Mobile: \_\_\_\_\_ Student Email: \_\_\_\_\_

Home Address: \_\_\_\_\_

Parent Mobile: \_\_\_\_\_ Parent Email: \_\_\_\_\_

### Transportation

☐ Riding Van ☐ Driving Car ☐ Riding in a Car. If so, whose car? \_\_\_\_\_

Other Schedule or Transportation Needs? \_\_\_\_\_

#### (Check off what is included with this form)

##### Due by March 8:

- ☐ Form (below)
- ☐ \$35 Deposit\*
- ☐ Medical Release
- ☐ Accountability Form
- ☐ Scholarship Application\*\*

##### Due by March 22:

- ☐ Remaining \$75



# Spring Retreat 2017

## Accountability Form

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This form is to help students and parents understand what is expected while on the trip and the consequences should the student's actions detour from the expected behaviors. We ask that both the student and the parent sign this form for the student to be allowed to attend the trip.

STUDENT NAME:	PARENT NAME:
<p><b>I COMMIT TO:</b></p> <ul style="list-style-type: none"> <li>• <i>Making payments on time and communicating what I need for this trip to my parent(s). THIS INCLUDES BEING AT LHC ON TIME SO WE LEAVE ON TIME.</i></li> <li>• <i>Loving and encouraging others with my words and action.</i></li> <li>• <i>Leaving my bad attitude at the feet of Jesus.</i></li> <li>• <i>Having a cheerful heart that demonstrates flexibility without complaining.</i></li> <li>• <i>Honoring the leaders and other students with my swift obedience to the rules and requests that have been communicated to me during the trip. THIS INCLUDES BEING ON TIME.</i></li> <li>• <i>Staying in groups of three or more and making wise choices about my safety and the safety of others.</i></li> <li>• <i>Preparing well by packing what I need according to the packing list.</i></li> <li>• <i>Keeping up with my things while on the trip.</i></li> <li>• <i>Being wise to not bring alcohol, drugs, illegal substances, tobacco (fake or real), abusive language, weapons of any kind ( i.e. personal pocket knife etc.), fireworks, water balloons, shaving cream or other mischievous item.</i></li> <li>• <i>Being engaged with God through worship and the speaker – avoiding being disruptive.</i></li> <li>• <i>Opening my heart to receive from God and others.</i></li> <li>• <i>Praying for this trip before, during and after.</i></li> </ul> <p>Signature: _____</p> <p>Date: _____</p>	<p><b>I UNDERSTAND THAT:</b></p> <ul style="list-style-type: none"> <li>• The adult leaders on the trip will address any behavior or spiritual issue involving my student while on the trip and may call me if they need my immediate parental response.</li> <li>• If there is an issue that involves my student on the trip, Dela will let me know upon their return. If I have already been called during the trip, then Dela will let me know how it was resolved.</li> <li>• If an issue cannot be resolved during the trip or my student is involved in an illegal activity, then I will be called to pick up my student or pay to have my student transported home.</li> </ul> <p>I commit to pray for the leaders and the students before, during and after the trip so that God's purposes will be realized and that the students love and encourage one another with their actions and words.</p> <p>Signature: _____</p> <p>Date: _____</p>

## **MEDICAL CONSENT**

I, \_\_\_\_\_, am the mother / father / legal guardian of \_\_\_\_\_, a minor. I hereby give and grant my full permission and authority to any Lake Highlands Church staff member or trip chaperone/sponsor to exercise care and control over my child, and to consent to medical treatment of my child while my child is on any trip or outing sponsored by the Lake Highlands Church of Dallas, Texas. This grant of permission and authority extends to both emergency and non-emergency treatment decisions that may need to be made on behalf of my child in case of any illness or injury, to be administered by such medical institutions and medical professionals as may be selected by the aforementioned staff member or trip chaperone/sponsor, including any procedure that such medical institutions and medical professionals deem advisable in attempting to relieve an emergency condition or any related unhealthy condition that may be encountered during any necessary operation.

I agree that the Lake Highlands Church, staff members and trip chaperones/sponsors shall not be held responsible for any accident which might occur in connection with this trip.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Parent's Phone Number(s)

\_\_\_\_\_  
Date

Insurance Company Name \_\_\_\_\_

Insurance Policy Number \_\_\_\_\_

### **Current Medical Information for Your Student**

Allergies: \_\_\_\_\_

Medications (prescription and over-the-counter): \_\_\_\_\_

\_\_\_\_\_  
Any Medical Conditions (example: asthma):



**NOTE: Please fill out ONLY IF YOU NEED ASSISTANCE with payment.**  
To receive assistance this application must be completed and signed by a parent.

**EVENT:** 2017 Spring Retreat – Camp Hoblitzelle

**COST:** \$110.00     **Minimum Payment:** \$35 (paid by March 8, to hold your spot)

**Registration Deadline:** March 8, 2017

It is our desire for every student to be able to attend the Ignite Student Ministry retreats, camps and mission trips despite their economic situation. To this end, we offer partial scholarships and payment plans.

We ask that you prayerfully consider how much you can contribute in order to stretch our budget to allow for other students to receive scholarships.

Student's Name: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent Mobile #: \_\_\_\_\_ Parent Email Address: \_\_\_\_\_

Student Mobile #: \_\_\_\_\_ Student Email Address: \_\_\_\_\_

**I need a later payment date to provide entire trip cost.**

I can pay \$\_\_\_\_\_ (minimum of \$35 to hold your spot) now, and then I can pay in full by\_\_\_\_\_ (date).

*Parent Signature:* \_\_\_\_\_

**I cannot afford to pay for the entire trip balance. I am requesting a partial scholarship.**

I can pay a total of \$\_\_\_\_\_ (minimum of \$35 to hold your spot) towards the retreat cost. I am requesting a scholarship for the balance.

*Parent Signature:* \_\_\_\_\_



## 2017 Spring Retreat | March 24-26

VANS LEAVE THE BUILDING **on Friday, March 24, AT 5:30 SHARP!!**

VANS ARRIVE AT THE BUILDING on Sunday, March 26, NO LATER THAN 10:00 A.M.

## Packing List

GUYS BRING:



### Heart

- Cheerful obedience/ flexibility
- Servant's attitude
- Inclusion, kindness & respect
- BE ON TIME
- HONOR YOUR COMMITMENT TO TRIP AND TEAM

GIRLS BRING:



### Learning Tools

- Bible (PRINTED not digital)
- Journal
- Pen



### Toiletries

- Towel & washcloth
- Toothbrush / Toothpaste
- Deodorant
- Soap, shampoo, conditioner



### Clothes (don't over pack!)

- Comfortable clothes for warm & cool temperatures. (Think modest & honor God with your clothing choices.)
- Athletic Shoes
- Athletic Clothes
- Light Jacket (check the weather to see if a rain coat/umbrella is needed)



### Bedding

- Sheets & a blanket or sleeping bag plus a pillow
- Flashlight

(The beds will not have linens so you must bring your own!)



### WHAT NOT TO BRING:

- alcohol, drugs, illegal substances, tobacco (fake or real), or abusive language
- weapon of any kind i.e. personal pocket knife etc.
- fireworks, water balloons, shaving cream or other mischievous items