

Hillside UMC's Youth Ministry Presents:

Sr. High Winter Retreat

“IGNITED & UNITED”

January 3-6, 2019



The main purpose of this Retreat is TO GROW & BE UNITED as disciples of JESUS CHRIST

There will be times of great fun that help us get to know one another better & enable us to laugh & live life together. However, the main emphasis is to grow deeper as a disciple & learn how to practically walk closer with Jesus! So COOL! This year we're going to Fort Mountain Retreat Center in Chatsworth, GA!! Students continue to say: "THE WINTER RETREAT HAS BEEN ONE OF THE DEEPEST & MOST GROWING EXPERIENCES OF MY YEAR!"

We are very excited to be teaching from a Bible study based on the movie Woodlawn, which focuses on the move of the Holy Spirit for revival in our community and country.

What a JOY it will be to start 2019 in community with one another!

Total Cost: \$190--Deposit of \$100 due **by Nov. 28th**

Balance Due Dec. 19th Siblings pay \$180

Either pay online OR in person

-Make checks out to "Hillside UMC"

Online payment &/or Scholarship Request forms available at: www.hillsideumc.org under the Youth Ministry section

---- PARENT VOLUNTEER DRIVERS NEEDED ----

Help our Volunteer Adult Leaders drive all of the youth to and from Fort Mountain! We will need drivers that can take us over on **Thursday at 1:00pm** and/or pick us up on **Sunday at 11:00am**.

Email our assistant youth minister, Anne Beyer, including the number of seat-belted spaces you have available in your vehicle, not including yourself, as well as whether you can take and/or pick-up.

Fort Mountain is about 1 ½ hours from here, up 575

Let Anne know ASAP if you can drive and we will configure the schedule of drivers. THANK YOU!

abeyer@hillsideumc.org or 770-924-4777 x133

Departure and Return:

- We will leave at 1:00pm on Thursday the 3rd, from the church parking lot! Please be at Hillside UMC by 12:30pm to load up. (Make sure you eat lunch before coming or bring it with you.)
- We will return by 12:30pm on Sunday, the 6th.
- We will be staying at: Fort Mountain Retreat Center, Chatsworth, Ga. –about 1 ½ hours from here. We will have rooms with heat and bunk beds in them. There are community bathrooms with electricity.

What to bring:

- **Bible and a pen and small notebook or journal to take notes – Mandatory to have!!!**
- Toiletries and appropriate clothes. Pack light, but bring some warm clothes in case of cold weather.
- Tennis-shoes for any playing in the field and/or shoes for basketball shoes for the court.
- Sleeping bag or bedding, pillow, and towel. NOT a good retreat for hammocks.
- Snacks would be fine for you to bring, but not a necessity.
- Games that you think would be fun for a group to play, as well as Frisbees and footballs if you desire.

What Not to Bring:

- **No electronic devices other than a phone.**
- **NO EARPHONES AT ALL PLEASE!**
- No Practical Joke Stuff – we don't do these.
- No fireworks of any kind.
- No tobacco products or illegal drugs or alcohol.
- No Knives

Please contact us if you have any questions.

Steve Brooks 770-924-4777 x116

sbrooks@hillsideumc.org

Youth Minister, Hillside UMC

Or

Anne Beyer x133 abeyer@hillsideumc.org

www.hillsideumc.org

HILLSIDE UNITED METHODIST CHURCH

PERMISSION SLIP, MEDICAL RELEASE, AND LIABILITY WAIVER

Function: Senior High Winter Retreat
Place: Fort Mountain Retreat Center in Chatsworth, GA
Dates: January 3-6, 2019
Travel: Adult Youth Leaders' Vehicles & approved Parent Volunteers

I, _____, hereby give my permission and approval as parent and/or guardian for _____ to participate in the **Senior High Winter Retreat, Jan. 3-6, 2019**. It is my understanding that this trip and the activities of this trip are approved by the church and is appropriately chaperoned. I hereby release Hillside United Methodist Church, its staff, and volunteers from responsibility and liability for any injury, illness, medical bills, or loss of life that my child may sustain during these activities.

In the event of an emergency, I hereby authorize an adult leader from the Hillside UMC Youth Ministry to act as an agent for me and to consent to any x-ray examination, medical, dental or surgical diagnosis, treatment, and hospital care advised and supervised by a physician, surgeon, dentist, (as appropriate) licensed to practice under the laws of the state where the services are rendered, whether at a doctor's office or in any hospital. I expect to be contacted as soon as possible in the case of such injury that requires medical attention.

I also understand that photos or images of my child may be used in publicity and/or social media within the youth ministry as appropriate. (Please note below if you do not give permission for photos to be used.)

Parent(s) or Guardian's Name: _____

Parent Email (one most used): _____

Address: _____

Phone #: (H) _____ (W) _____ (C) _____

Any other emergency contact: _____

Insurance Company: _____

Policy Number: _____

Family Physician: _____ Phone# _____

Date of last DPT or DT booster? _____

Any allergies, medications, injuries or special instructions we need to be aware of during the event:

Parent or Guardian's Signature

Date