

REGISTRATION FORM

COMPLETE AND RETURN TO YOUR YOUTH
GROUP LEADER

Circle: Male Female (needed for lodging)

Name: _____

Address: _____

City: _____

Zip: _____

Phone: _____

Grade: _____ Age: _____

Church: _____

Circle T-shirt size: S M L XL XXL

PARENTS OF MINORS:

I give permission for my son/daughter (named above) to attend the Encounter 2017 Retreat held at Camp Hebron on January 20-22 2017. I authorize my child's youth group leader _____ (insert leaders name) to seek appropriate medical care from a licensed physician or medical facility.

SIGNED: _____

Name of Insurance Co.: _____

Name of Policy Holder: _____

Insurance ID# _____

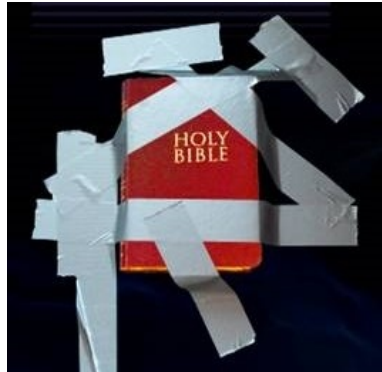
LIST ANY FOOD/MEDICATION ALLERGIES:



ENCOUNTER RETREAT 2017

JANUARY 20-22, 2017

ENCOUNTER RETREAT 2017



Encounter speaker: Pastor Todd Wolfe

Worship Leader: Andy Sell

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Camp Hebron

957 Camp Hebron Road

Halifax, PA 17032

Emergency # 717-896-3441

& Toll Free: 800-864-7747

www.camphebron.org



Luke 11:9-10 New Living Translation (NLT)

9 “And so I tell you, keep on asking, and you will receive what you ask for. Keep on seeking, and you will find. Keep on knocking, and the door will be opened to you. 10 For everyone who asks, receives. Everyone who seeks, finds. And to everyone who knocks, the door will be opened.

** Teens: Submit your registration form and payment to your youth leader

**Leaders: Submit tally form & registration fee (Checks made payable to “Encounter Retreat”)

to:

Scott Kimbel

109 West Church Street

Denver, PA 17517

atcscott@ptd.net

717-435-7025

**REGISTRATION DEADLINE:
MONDAY, DECEMBER 5, 2016**

RULES

- Come prepared to have fun
- No Skateboards or inline skates
- No drugs, alcohol, or tobacco
- Observe lights-out and quiet times
- Attend ALL sessions
- Conduct yourself with a Good Christian Attitude

WHAT TO BRING

1. Bible, notebook, pencil, etc.
2. Seasonal Clothing
3. Toiletries
4. Pillow and sleeping bag

COST

\$125 (per person) by December 5, 2016

\$140 (per person) after December 5, 2016