

Abundant Life Chapel – REFUGE AT YOUTH CAMP 2019 (Grades 9-12)

August 20th-25th Refuge Youth is going to YOUTH CAMP!! located at Manhatten Beach Retreat Centre, on Pelican Lake (Near Ninette, MB).

We are meeting at Abundant Life Chapel Tuesday August 20th, leaving at 11:00AM. We will be stopping in Winnipeg for Lunch on the way there, and supper on the way home. Please ensure each student has sufficient cash to cover these two meals. Pick up will be at Abundant Life Chapel Sunday August 25th *approx.* 8:00pm- If we're running early or late we'll give you a call or text. Every student **must** register online at www.nextgenmb.net & hand in this waiver form in order to attend Youth Camp. (Cost of Youth Camp is on the above website with registration).

As an added bonus, we're not charging anything for transport down to camp.

What to bring:

- | | | |
|--|----------------------------|--------------------|
| • Bible & Notebook | - Sports clothes | -Comfy Clothes |
| • Bedding + Pillow (sleeping bag, sheet/blanket) | | - Swimsuit + towel |
| • \$\$ for the candy store | -Rain Gear | -Water bottle |
| • Toiletries | -Sunblock | -Bug Spray |
| • Warm jacket | -\$ for 1 lunch & 1 dinner | |

If for any reason you need to reach your student while we're at camp Pastor James cell number is (204) 340-1005. Or you can contact Manhatten Beach Retreat Centre at (204) 528-3306.

This waiver form is to give the below student permission to participate in Refuge at Youth Camp 2019. Student Name (print):

_____ the undersigned parent or legal guardian of the minor, grant permission to the above mentioned child to participate in the above stated event. I/we, the parents or guardians named above authorize REFUGE Youth leaders of Abundant Life Chapel to sign a consent form medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above. I/we, named above, undertake and agree to indemnify and hold blameless REFUGE Youth leaders, Abundant Life Chapel, its Pastors and Board of Elders from and against any loss, damage or injury suffered by the participant as a result of being part of this activity of Abundant Life Chapel, as well as of medical treatment authorized by the supervising individuals representing the church.

Parent / Guardian Signature: _____ Parent Contact
ph.# _____

Manitoba health #(6 digits) _____ PHIN(9 digits)

_____ Emergency Contact: _____ Emergency contact ph.
