

Northwest Region Youth of Unity Annual Retreat

“Love Finds You Where You Are”

Oct. 16-18, 2026

Cispus Learning Center – Randle, WA

YOU Retreat is a 3-day communion with Spirit. Daily activities include large group workshops, small group discussions, singing, meditation, dancing, prayer and vespers.

MISSION: To guide participants in shifting from searching to being—trusting that Divine Love will meet them right where they are.

HOSTS: The Northwest Regional Youth of Unity Leadership Team

Bri Janssen

Regional Officer 2026-2027

Nick Muncie-Jarvis, Youth of Unity Director

you@unitynwregion.org 503-568-1692

Heidi Nathe

NW Region Uniteen Coordinator

Eligibility age requirement to attend: YOUers must be at least 14 years old [or in ninth grade] & no more than 18 years old [or high school senior] *exceptions for regional officers.*

Participants must attend the entire weekend experience from beginning to end. They are active members in their YOU group who have demonstrated maturity, self-discipline, and self-responsibility. Retreat is for people who sincerely desire to learn more about Truth and are willing and able to contribute by actively participating in the Retreat activities. It is recommended that those attending Retreat have attended at least 4 Chapter meetings in the last 3 months. ADULTS must pass a background check before registering.

Medical/Liability Release Forms: Make 3 copies of each participant's signed forms.

ALL YOUer forms must have witnessed parent/guardian signatures. Keep one copy at your ministry. Carry one copy to and from the event. Mail one copy with the Registration Form. Registrations without these forms will not be accepted.

To Register send the following to: NW Youth of Unity, 6170 NE Beech St, Portland, OR 97213

1. Chapter Registration form listing all attendees from your chapter,
2. Medical/Liability Release form for each person completed
3. Heart Agreement form for each person signed
4. **One check for the chapter at \$300 per person** (\$275 each if postmarked by Sept. 14).
Registration closes on Sept. 28. ***In case of cancellation, \$170 per person will be retained to cover pre-event expenses. For cancellations after Sept. 28, partial refunds may be given at the discretion of the YOU Director.***

Arrive between 3:30-4:30 p.m. on **Friday**. **Depart after** closing circle on **Sunday**.

Money to share a love offering on Sunday and for travel is suggested. No store exists on the grounds. Come supplied with personal items.

Housing is in dorms. You will be assigned to a room in the dorm. On arrival check in at the registration office where you will receive your room assignment and instructions.

Assignments are random. In your dorm room and family group of 8-10 people, you will have an opportunity to learn about yourself and others and make lasting friendships.

Electronic devices: During Retreat phones are to be set to airplane mode and used for camera and time-telling only. Please do not communicate via text, calling, or social media. Restrict use of iPods/MP3 players and other personal electronic equipment for rehearsing for the "Spirit Share" and/or if needed for sleep at night with headphones AND with permission of those around you. Leaders may use them for meditation times. Electronics are not meant to take away from your personal spiritual experience, so be conscious of their use. [For exceptions or emergencies see Nick Muncie-Jarvis, NW YOU Director]

"Spirit Share" registration forms should be submitted prior to Retreat. Bring your instruments, skits, props, costumes and imaginations. The theme and spiritual intent of Retreat are to be reflected in all the acts. Keep this in mind while preparing your act. Lyrics to all songs are needed prior to performing.

Forms are complete only with required signatures. All participants, adult and teen, need their own signatures, plus staff witness AND minister. ALL YOUer's, **even 18 or 19-year-old seniors**, need parent or guardian signature. Three copies of the Medical/Liability Release Form are necessary. Keep one copy for your ministry/chapter. Carry one copy to and from Retreat. Send one copy with the registration. Registrations without these forms will not be accepted.

Attending all scheduled activities is required because every person, and activity, adds to the Retreat experience. There will be free time on Saturday afternoon for alone time or to be with friends.

During free time miscellaneous recreation equipment is available. Everyone is still required to stay within the boundaries.

Meals are similar to public school lunches. The kitchen staff attempts to meet special dietary needs when asked in advance. Participants may bring food to supplement what the camp serves.

Bring:

1. Medical Release Form (your copy)	5. Clothing for all types of weather
2. Sleeping bag or bedding and pillow	6. Closed-toed shoes & dancing shoes
3. Towel and washcloth	7. Props for "Spirit Share"
4. Personal care items i.e., toothbrush, deodorant, soap, shampoo, etc.	8. Love Offering

Cost: \$300 (\$275 by Sept. 14) includes meals & lodging from Friday dinner-Sunday lunch, plus t-shirt.

Cancellation Fee: \$170 will be retained to cover pre-Retreat expenses.

Chapter sends 1 check or money order payable to Northwest Youth of Unity.

For messages in an EMERGENCY, call 360-497-7131. (No cell phone service).

RETREAT LOCATION:

Cispus Learning Center is 11 miles South of Randle, WA 98377

From US-Hwy 12 in Randle, turn south on to WA-Hwy 131 at the intersection with the Shell gas station and Mt. Adams Family Restaurant

After the bridge, make a slight left at Y onto Cispus Road (Road 23)

After about 8 miles turn right onto Cispus Road (follow signs to Cispus Learning Center)

After the bridge, turn right onto Cispus Road (follow signs to Cispus Learning Center)

After about half a mile, turn right into Cispus Learning Center

ADULT ROLE AT RETREAT

ADULTS SERVING AS SPONSORS ARE AT LEAST 25 YEARS OF AGE

(Adults serving as Junior Sponsors are 21- 24 years of age and may attend as assistants)

PRIOR TO THE EVENT:

- Read, discuss, and sign Group Heart Agreements
- Promote a prayerful consciousness ready for spiritual study and enthusiastic participation. Discuss the purpose of the event, their feelings about attending, their expectations and what they can share. Stress the importance of prayer before and during the event.
- Become comfortable with touch (holding hands in a circle; non-threatening massage; touch exercises)

DURING THE EVENT:

- See that all your chapter's assignments at the event are completed
- Circulate and participate with youth in activities
- Meet and welcome new sponsors
- Remain on the grounds during weekend
- Lock automobiles securely
- Be aware of special needs such as discipline with a loving, firm, encouraging approach; emotional support; physical support with setting up, etc.
- Report all disciplinary action to Regional Director
- **If you are uncomfortable or questioning the choices or behaviors of YOUers or other adults consult with Nick Muncie-Jarvis before saying anything to the individual. [Unless it is a clear and immediate violation of the heart agreements, such as leaving the camp boundaries.]**

IN DORM AREAS:

- Account in dorm room for all people by lights out. If missing people, contact Nick Muncie-Jarvis.
- Support teens in a sharing & cabin gathering time each evening
- See that health/medication needs are met (can send to Wellness person)
- Provide nurturing and support to "Dorm-mates"
- Check dorms to see that all are out before scheduled events
- Check dorms during weekend (to confirm that only those that belong there are present)
- Promote the cleanup of the dorms on morning of last day

RETREAT 2026 CHAPTER REGISTRATION FORM

Oct. 16-18 we are planning to attend the NW Region Youth of Unity Retreat. We signed the Heart Agreements and will abide by them.

YOUers must have a designated Event Sponsor in order to attend NW YOU events. Ideally, each YOU chapter will send at least one adult to accompany their youth. If that's not possible, the Sponsor/Minister/Board must designate an adult attendee from another Unity ministry that has agreed to serve as the Event Sponsor for their YOUers.

Chapter: _____

Sponsor/Event Sponsor: _____

Participant Name	Gender	Age or Sponsor	Shirt Size	Last Timer	Cabin Vespers Leader*	Family Leader*	Dietary Needs, i.e. Vegetarian

*Checking this box indicates interest. The Regional Team will invite interested people to fill available positions.

Mail one check per chapter, with Medical Liability Release, Heart Agreement & Photo/Video Release forms to:

NW Youth of Unity, 6170 NE Beech St, Portland, OR 97213

One check for chapter @ \$300 per person. *If postmarked by Sept. 14, the per person price is \$275.* Registration closes Sept. 28.

In case of cancellation, \$170 per person will be retained to cover pre-event expenses. For cancellations after Sept. 28, partial refunds may be given at the discretion of the YOU Director.

ADULT & TEEN MEDICAL/LIABILITY RELEASE

[Rev. 5/19]

FOR ACTIVITIES SPONSORED BY THE UNITY NORTHWEST REGION & LOCAL UNITY MINISTRY

Complete form in INK. Form can be kept on file until following August 31st and must be UPDATED if any information changes. One copy of the form is to be sent with registration to regional events, and one copy should be carried with participant to each event.

Name of Participant: _____ Birth Date: ____ / ____ / ____ Grade: _____

Unity Ministry: _____ Personal Email: _____

Name of Parent/guardian (if YOUer): _____ Relationship: _____

Address _____ City, State: _____ Zip: _____

Home Phone: _____ Other numbers to use: _____

Emergency Contact(s) Name: _____ Phone: _____

As legal guardian of the above-named participant, I give my permission for them to travel and participate in Youth of Unity activities. I am familiar with and approve of the mode of transportation, the leadership accompanying the group and the other circumstances of the trip.

I certify that the above-named participant is in good health and able to participate in all activities: ☐ YES ☐ NO If NO, specify limits of participation: _____

I certify that the participant's behavior allows for cooperative participation in various camp settings without disruption to others or compromising their safety or the safety of others: ☐ YES ☐ NO

The minor under health care guidance for: ☐ ADHD ☐ ASD ☐ Allergy ☐ Asthma ☐ Counseling ☐ Diabetes ☐ Epilepsy ☐ None

Does this participant have special needs that we should be aware of to make this retreat experience positive? _____

Are there any life circumstances that sharing with adult leaders will support them in supporting this participant? _____

Does this participant have an IEP/504 Plan in place? ☐ YES ☐ NO If YES, please send a copy with the application so we can make sure we can meet all of the needs.

Other condition or special care needs: _____ Sleep needs: _____

Allergic to any food or medication? ☐ YES ☐ NO If YES, specify: _____

Current Medication(s): _____ Date of last Tetanus shot: _____

Group leaders must be informed of any prescription medication brought by youth, with clear information as to proper use and dosage. If medication is "as needed," this participant must understand the symptoms of their condition and know when to ask for help.

Family Physician (name & phone number): _____

Medical Insurance (company & policy number): _____

Phone No. to verify coverage or submit claim: _____ Policyholder's Name: _____

About Insurance Cards – It Could Be Important!

A hospital may require a Social Security number and/or insurance card as proof of insurance) before treatment or admittance. You should make sure the participant carries that information to events, or provide that information here: SS# ____ - ____ - ____ **or attach copies (front and back) of insurance card to this form.**

As the above-named participant (or legal guardian if the participant is a minor under the age of 18), I hereby attest that I have read this complete document; all information provided is complete and true; I have legal standing to make decisions which affect the rights of the above named participant; and I understand and consent to all terms outlined in this document. I hereby voluntarily and knowingly assume all risks and dangers inherent and incidental to Youth Ministry activities and travel understanding that some activities may pose a risk of injury. I will not hold liable the Ministry, or the Association of Unity Churches (Association) or the Northwest Region of the Association (Region), their employees, agents and event/youth group leaders for any injury, illness or property damage involving the above-named participant no matter how caused. Whenever deemed necessary by group leaders, I authorize the calling of a d` or and/or the providing of other medical services and, unless covered by insurance, agree to pay for same. If the above-named participant is incapacitated or under age 18, I do hereby authorize group leaders as agent for the undersigned, to consent with respect to such participant to any x-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment, and hospital care which a state-licensed physician or surgeon deems advisable.

Signature of Adult Participant or **Parent/Guardian of YOUer of any age:** _____ Date: _____

******* SIGNATURE MUST BE WITNESSED BY MINISTRY STAFF OR TRUSTEE or notarized *******

Signature of Witness: _____ Print: _____ Date: _____

ADULT AND TEEN GROUP HEART AGREEMENTS

[Rev. 5/26]

To ensure the ultimate experience for all and as a participant attending this event, I agree to uphold these agreements from the time I leave my home until the time I return from the event. I acknowledge that consequences may ensue if I do not honor these agreements.

1. To respect and take care of the facility, others and myself, I agree to:
 - a. Look for the highest good in all people and situations and not be part of character assassinations, pranks, put-downs or negative judgments of others or myself.
 - b. Find ways I can both give and receive to make this event a unique and meaningful experience.
 - c. Show loving support and gratitude for all YOUers, sponsors, facilitators, speakers, and camp staff and not offend or degrade others with my language, jokes, music, or actions.
2. To be open and fully present for the entire experience, I agree to:
 - a. Attend required activities on time.
 - b. Give my loving focus during activities.
 - c. Stay in designated areas.
 - d. Commit to arriving by the designated time for check-in for this event and stay through the scheduled closing time.
3. To honor the experience of others, I agree to:
 - a. Quietly seek a sponsor if I have difficulty focusing during any activities and need personal care.
 - b. Respect lights out and quiet time.
 - c. Remain in the spaces (family group, room, bed, etc.) to which I am assigned.
 - d. Not wear clothing that is offensive, inappropriate for the space, or that promotes illegal activity.
 - e. Not share bunks, blankets, sleeping bags, showers, or single-user bathrooms.
4. To maintain a positive, spiritual intention in all my relationships, I agree to:
 - a. Not engage in sexual activities, unwanted physical contact, or public displays of affection which cause others present to feel uncomfortable.
 - b. Recognize that others have different levels of comfort, experiences, and triggers with sensitive topics (such as sexuality, body image, family backgrounds, coping strategies, etc.).
 - c. Save discussions about topics that may cause others to feel uncomfortable for private group sharing settings.
5. To keep my consciousness fully present at the event, I agree to not communicate with the outside world or other YOUers using technology. Acceptable uses of technology include: 1) picture taking or 2) checking the time. *For emergencies see Nick Muncie-Jarvis, NW YOU Director.*
6. I agree to not use this event or my NW YOU connections to promote, encourage, facilitate, conceal or arrange participation in illegal or inappropriate activities—including but not limited to use or possession of alcohol, tobacco, nicotine, marijuana, illegal drugs or other restricted substances.
7. To support the consciousness of this event, I agree to uphold and enforce these agreements throughout my entire experience – from my travel to registration, through travel home after the closing of the event.
8. If I have difficulty abstaining from restricted activities or substances, I understand it is my responsibility to discuss support needs with a Sponsor or Nick Muncie-Jarvis. Consequences to broken agreements may include sponsor or peer discussion, or investigation of illegal activity in order to maintain a safe and spiritual space for all. Further consequences may include an individual/chapter being sent home early.

Photography Release: I hereby grant the Ministry, Region, Association and its representatives permission to use, without compensation or restriction, photos and videos with participants names (from local and regional Unity events) in which the participant appears, in any manner whatsoever such as, but not limited to: publication, display, advertising, slideshow, website, social media, etc.

Confidentiality: I understand that information on this form will only be shared, as needed, with group leaders, ministry staff and medical professionals to safeguard and support the participant. This information will not be publicly disseminated or released to any outside organization. However, since it is common practice for the Ministry (or Region) to publish a participant's contact information on the group's roster if they actively participate in the group (or attend a regional event), I authorize the Ministry (and Region) to publish such information on a local (or event) roster EXCEPT for the following (*please specify*): _____

Limit of Consent: The consent outlined in this Medical/Liability Release, concerning my child's participation in Youth Ministry activities, expires next **September 1st** (or earlier, if listed here: _____). **It is my responsibility to notify the group leaders or minister if any information changes or I decide to withhold consent.**

Print Name of Participant: _____ Signature of Participant: _____

If YOUer [regardless of age], Print Name of Parent/Guardian: _____

Parent /Guardian Signature: _____ Date: _____

Minister's Signature: _____ Date: _____ Ministry: _____

Gender-Neutral Housing Permission Form (Optional)

The purpose of providing a gender-neutral housing option is to create an equally safe and engaging dorm experience for people of any gender identity.

Things to Know:

- The intention is to create a physically, emotionally, socially, and spiritually safe space for people to be themselves.
- At least two adults will be selected by the YOU Director to supervise the gender-neutral dorm. In the absence of two or more willing gender diverse adults, at least one female-identified adult and at least one male-identified adult will be chosen to supervise this dorm room.
- If there are not at least two adults available and willing to supervise this dorm, then there will not be a gender-neutral dorm option available.*
- This is an opt-in dorm. It is open to gender diverse youth and cisgender youth, as space allows.
- All youth must have this permission form signed by their parent/guardian to be considered for this dorm.
- Gender diverse youth are not required to be in the gender-neutral dorm.
- Priority will be given to gender diverse youth that apply for this dorm, then cisgender youth that have applied will be chosen to fill the rest of the spots in that dorm.
- Private changing areas will be provided in the dorm(s).
- This dorm will only be open to those assigned to it.

Name of Participant: _____ ☐ Gender Diverse ☐ Cisgender

*If there is not a gender-neutral dorm option, where does the participant want to be housed?

☐ Female Dorm ☐ Male Dorm

Unity Ministry: _____ YOU Sponsor: _____

Parent/Guardian: _____ Parent/Guardian Phone: _____

As parent/legal guardian of the above-named participant, I hereby give permission for them to be assigned to the gender-neutral dorm for the following Northwest Youth of Unity event(s):

☐ Retreat (October) ☐ Rally (April) ☐ Rendezvous (August) ☐ All

Signature of Adult Participant or **Parent/Guardian of YOUer of any age:**

_____ Date: _____

***** SIGNATURE MUST BE WITNESSED BY MINISTRY STAFF OR TRUSTEE or notarized *****

Witnessed by: _____
Signature Print Name Date

[Rev. 10/19]

Retreat 2026

[illegible]

Northwest Region YOU Sponsor Agreements
FOR ADULTS PARTICIPATING IN YOUTH MINISTRY

[Rev. 8/25]

1. I prepare myself through prayer, meditation, contemplation and reflection.
2. I dedicate and consecrate myself to expressing the living Christ and honoring the Christ expression in others. I look to the indwelling Christ for inspiration to guide, govern, and prosper me and to behold the divinity in all people and situations.
1. I, as a Youth of Unity sponsor, dedicate myself to the principles of Truth as taught and exemplified by Jesus Christ, and interpreted by Unity World Headquarters and the Unity Worldwide Ministries.
2. I teach Unity Truth teachings and help teens understand their own beliefs. I prepare for all lessons and activities. I prepare YOUers for events by helping them to understand what the event is about, how it functions, the importance of agreements, and helping them clarify their own personal and spiritual growth expectations. *I am honest with students and let them know that my beliefs come from my own spiritual awareness. I make sure they understand I am not telling them what to think.*
1. I adhere to all Northwest Region policies, event agreements and state laws. I work in harmony with the Region's event leaders, fellow sponsors, and minister(s). Should I disagree with their plans or leadership style, I address the issue directly with them. *I promptly discuss any agreement violation, medical situation or concerns about a fellow sponsor's decision or conduct with the Regional Director.*
2. I hold sacred my role as sponsor and agree not to assume the role of professional counselor. I am not involved in YOU to be "one of them", to be viewed as a parent or to 'fix' anyone. Nor do I use YOU as my support group but seek out a minister or my peers for advice and counseling on personal matters. I realize that my highest role is to pray with, support, and encourage YOUers to live from their indwelling Christ. I create an atmosphere of love, safety, and support.
3. I respect and hold sacred all participants' expectation of confidentiality when sharing and inform them in advance of my one obligation to report any threat of harm to oneself or to others. I discuss any suspicion of abuse or suicidal ideation immediately with the Regional Director/Event Coordinator.
4. My behavior sets the highest example, not compromising the integrity of the YOU experience in any way. Specifically, in my role as Sponsor:
 - *My words and expressions honor the Christ in all people. I do not tell jokes or speak words that contain sexual innuendos or dishonor any race or ethnic group. Nor do I discuss my sexual activity or experiences.*
 - *I use my role to be an encourager and supporter. I do not engage in put-downs or in any physical, mental, emotional or sexual harassment.*
 - *I do not prolong hugs, return or initiate a kiss.*
 - *I do not touch anyone in a sexual manner, including, but not limited to, the genitals, breasts or buttocks (which includes not allowing a teen to sit on my lap).*
 - *I am not with teens or adults in any compromising location or situation.*
 - *I exercise good judgment about my relationships to invite only the highest respect.*
 - *I do not use illegal substances, alcohol, cannabis, or tobacco.*
 - *I complete all forms and requirements for events truthfully, accurately, and in a timely manner.*
 - *I lead by example by actively participating in all scheduled activities.*

I recognize, honor, and accept the value of Unity Worldwide Ministries, Youth of Unity and these agreements. I will, to the best of my ability, uphold the Youth of Unity values, mission, vision, and goals in service to this ministry. I will contact the Regional Director if I am unclear about an agreement or its application to a particular situation.

Signature: _____ Print Name: _____ Date: _____

I certify that this adult demonstrates these agreements and is unconditionally approved and sponsored by this ministry to participate in Northwest Region events as an adult sponsor. **I further certify that a current (within the last 2 years) background check is on file at our ministry that confirms this individual has no felony convictions for violence or abuse.** I understand it is our ministry's responsibility to notify the Regional Director should our ministry decide to modify or withdraw this affirmation of our support of this adult. **Date of most recent background check:** _____

Signature of Minister/YED: _____ Date: _____

Reporting Disclosures of Abuse Policy (“Mandatory Reporting”)

It is the policy of Unity Northwest Region that all adults present at a youth camp experience must report suspected abuse to the Event Coordinator and the appropriate government agency.

What is Reportable?

When any person has reasonable cause to believe that a child has suffered abuse or neglect, he or she shall report such incident, or cause a report to be made, to the proper law enforcement agency.

"Reasonable cause" means a person witnesses or receives a credible written or oral report alleging abuse, including sexual contact, or neglect of a child. (RCW 26.44.030.1.b.iii)

The Revised Code of Washington (RCW 26-44-020) states that: *"Abuse or neglect" means sexual abuse, sexual exploitation, or injury of a child by any person under circumstances which cause harm to the child's health, welfare, or safety... or the negligent treatment or maltreatment of a child by a person responsible for or providing care to the child.*

How To Report

Most states require that reports be made at the first opportunity after there is reasonable cause to believe that the child has suffered abuse or neglect.

Report to the Event Coordinator and to the government agency in the state where the youth resides. (See list below for the appropriate reporting phone number.)

What To Report?

- The name, address, and age of the child.
- The name and address of the child's parent, guardian or other persons having custody of the child.
- The nature and extent of the abuse or neglect.
- Any evidence of previous incidents.
- Any other information which may be helpful in establishing the cause of the child's abuse or neglect and the identity of the perpetrator.

Having all the above information is not necessary to make a report, but the more accurate the information the better equipped the offices will be to assess the child's safety.

Immunity

A reporter making a report in good faith is immune from liability resulting from the report or testimony. Reporting or testifying is not a violation of any confidential community privileges. The identity of the person reporting will be treated with appropriate confidentiality.

The goal is to keep our youth safe from harm. Thank you for supporting this intention.

Alaska: 1-800-478-4444 | ReportChildAbuse@alaska.gov |

<http://dhss.alaska.gov/ocs/Pages/publications/reportingchildabuse.aspx>

British Columbia: 1-800-663-9122 <https://www2.gov.bc.ca/gov/content/safety/public-safety/protecting-children/reporting-child-abuse>

Idaho: 1-855-552-5437 <https://healthandwelfare.idaho.gov/Children/AbuseNeglect/tabid/74/Default.aspx>

Montana: 1-866-820-5437 <https://dphhs.mt.gov/cfsd/childfamilyservices>

Oregon: 1-855-503-7233 https://www.oregon.gov/DHS/ABUSE/Pages/mandatory_report.aspx

Utah: 1-855-323-3237 <https://dcfs.utah.gov/services/child-protective-services/>

Washington: 1-866-ENDHARM (1-866-363-4276). <https://www.dcyf.wa.gov/safety/report-abuse>

NW Unity Travel / Driving Policy

1. Sponsors or designee of Sponsor/Minister/Board must accompany a Chapter/Youth Group to Regional, Inter-regional, Sub-regional activities, and Ministry Sponsored activities.
2. All participants are encouraged and expected to travel with Sponsor and Group to events.
3. YOUTH MINISTRY events are the International YOU Event, Regional Rally, Regional Retreat, Regional Rendezvous, Kids Camp Counselor's Training, Kid's Camp, Unitreat, Sub-regional Functions, and Local Chapter functions. **Regular meetings are excluded unless a special event is planned that involves leaving the Ministry grounds in which case Travel Policies apply.**
4. Each car traveling to a designated activity must have a Minister/Board/Sponsor approved adult driver, 21 years of age or older.
5. Designated drivers must have a valid driver's license and at least 1-year driving experience.
6. Designated drivers must have adequate effective insurance coverage on the car and occupants.
7. Cars transporting Youth will have adequate working seatbelts for driver and all passengers.
8. Ministry designated drivers—current driving record must be free of traffic violations/tickets.
9. The driver will be required to caravan with the rest of the group unless prior permission from Sponsor/Minster has been given.
10. Only the designated driver will be allowed to drive. No substitute drivers will be allowed. (Emergency situations will be considered as the need arises. i.e., Designated driver too ill to operate vehicle, but all other conditions must be met, and this would be rare.)
11. A current signed Medical/Liability Release Form must be in the possession of the Driver for **all** occupants of the car.
12. All drivers and passengers have read and signed the **Group Heart Agreements**.
13. The above Driving Policy Agreement must be signed and kept on record by the Ministry.
14. Parents must be informed of the designated driver.
15. Minister/Board must be informed of who's driving and who's riding in each car.

I understand the responsibility involved in agreeing to be a driver for this function. I will abide by the NW Unity Driving Policy.

Driver's Name: _____ Event: RETREAT 2026

Minister: _____ Date Leaving: _____ Date Returning: _____