

Get-a-Way to the Beach

Date: June 28 – July 3, 2009
Seaside High School

Check in: Sunday, June 28; 7 a.m. at Cole Community Church, Boise, Idaho

Conference Cost: \$135 (\$155 if postmarked after June 1)

Conference cost includes your \$49 non-refundable pre-registration fee, lodging for five nights, all meals and training materials. Bring money for snacks and souvenirs

Conference ends: Busses will return to Cole Community Friday July 3rd at approximately 6pm

Contact: Robert Frazier 208-573-1877 robert.frazier@studentventure.com

What to Bring: *Bible, pen, notebook, bedding, pillow, towels and toiletries, air mattress and pump, casual clothes (temps in the 60s and 70s), jacket for cool nights, one-piece swimwear, tennis shoes, sports clothing and money for snacks and souvenirs.*

Who Can Attend:

All high school students and youth leaders, including graduating seniors and incoming 9th graders.

Transportation:

Provided from Boise, Idaho

Adult Sponsors:

We request a ratio of one adult sponsor for every seven students attending.

Special Situations:

Anyone with special problems (health, psychological, etc.) should notify the registrar in a confidential statement submitted with this form.

Activities: *Soaking in the rays, sports and games on the beach, basketball, state park exploration, waterfalls and river floats, a day in Portland, time to listen to God—*



Beach Get-a-Way



PO Box 190347
Boise, ID 83719

Phone: 208.573.1877
E-mail:
robert.frazier@studentventure.co



Idaho Registration

personal information

IMPORTANT!

each parent/guardian or conferee (if over 18) must read and sign this release.

image release

Conferee understands that his/her voice or image may be recorded at this event and Conferee, along with his/her parent or legal guardian, irrevocably grants to Student Venture the perpetual, royalty-free license and permission to use, reuse, publish, republish the voice, likeness and photograph of the Conferee at Student Venture's sole discretion in conjunction with future ministry uses and promotion.

medical and liability release

In the event of any accident, sudden illness, or medical emergency involving the Conferee, I hereby authorize the staff members of Student Venture, as adult person(s) into whose care the minor has been entrusted, to consent to any medical treatment and hospital care deemed to be necessary by a licensed physician.

EMERGENCY CONTACT: _____

10-DIGIT PHONE NUMBER: _____

The undersigned is fully aware of the risks and other hazards inherent in this activity and is allowing the Conferee to participate in the activity. In consideration of the minor being permitted to participate, I hereby release, waive, discharge, covenant not to sue, agree to indemnify and hold harmless Student Venture, Campus Crusade for Christ, Inc. and their officers, directors, agents, affiliates, employees and assigns from any and all damages, liability, causes of action arising out of or relating to the minor's presence or participation in the conference.

PRINT NAME ~ Parent/Legal Guardian or Conferee (if over 18) _____

SIGNATURE ~ Parent/Legal Guardian or Conferee (if over 18) _____

*All registration prices include a non-refundable deposit. Deposit is transferable to a new student at a rate determined by postmark of new registration. Balance due at conference check-in.

Registration is valid only if all personal contact and insurance information is provided, including a proper signature.

Transportation to and from the conference is not included in the conference cost. **Check with your local group for best options. Rooming:** Let your youth leader know who you want to room with. Cost is based on four or more to a room. There is an extra charge for two people staying in a separate room, if available. We reserve the right to fill a room and to limit the number of late registrations. **Who Can Attend:** All high school students and youth leaders, including graduating seniors and those entering ninth grade are welcome at the Getaway. **Adult Sponsors:** We request a ratio of one adult sponsor for every seven students attending. **Special Situations:** Anyone with special problems (health, psychological, etc.) should notify the registrar in a confidential statement submitted with this form.

Name(Male Female)

Address _____

City _____

State _____

Zip _____

Email Address _____

Area Code and Phone _____

Birthdate mm/dd/yy _____

School _____

High School grad year _____

Name of your youth leader _____

Church or Group _____

Check all that apply

- Youth leader active coaching center affiliate CCC Staff kid
 College volunteer

Payment Information

Cost

Determined by complete registration form and \$49 Deposit postmarked by date indicated

\$135 (\$155 if postmarked after June 1)

Make checks payable to **Student Venture Idaho** or pay by credit card. Print and mail this completed form with your payment to:

**Student Venture Get-a-way - PO Box 190347
Boise, ID 83719**

Check Enclosed CC# _____ Exp. Date _____

Visa Mastercard Name on card _____

Signature _____