

CHILDREN'S BIBLE RETREAT 2011

SEPTEMBER 30 - OCTOBER 1

Participant

First Name _____ Last Name _____

Email Address _____

Home Phone _____ Cell Phone _____

Home Address

Address _____

City, State, Zip _____

Other Information

Gender _____ Birth Date (month/day/year) _____ Age _____

What grade are you in? _____

What allergies do you have? _____

What medications do you require? _____

In case of emergency, who do we contact? (Name, Number)

What is your interest group selection? (Please select 3 of the selections & you will be placed in two sessions, one morning and one afternoon). Your choices are: Crafts, Low Ropes, Outdoor Games, Mountain Bikes, Fishing, Archery, Spa Hour, Worship Music or Board Games.

1. _____
2. _____
3. _____

Please complete this form and return it with your \$30 registration fee to Caroline Noll in the church office by August 28. Checks may be made to FUMC and include "Bible Retreat" in the memo. Scholarships are available.