

-PAYMENT DETAILS- COST:

The cost for the trip will be \$50, this includes admission, transportation and lodging. Student's will be responsible for lunch and dinner on

-TRAVEL INFO- Basic Schedule

Departure:

Friday, March 12th @ 5:30pm

Return:

Saturday, March 13th @ 6:00pm

-CONTACT INFO-

trip leader:

Hal Mayer

emergency contact:

813-389-5359

-TRIP DETAILS- -INFO-

◆ We will be leaving the church office at 5:30pm on Friday.

◆ We will be staying at a hotel in the Kissimmee area.

◆ We will be returning to the office at 6:00pm on March 13th.

What To Bring: Bible, pen, clothes to sleep in, toiletries, appropriate clothing for a church event.

What Not To Bring: Guns, knives, tobacco, alcohol, questionable reading material, or a bad attitude. All types of I-pods and cell-phones will be turned off during the sessions, or will be confiscated for the time we are there.

-EXTRA INFO-

- ◆ If you child becomes unruly, they will be sent home at the parents expense.
- ◆ Extra money is only required for two meals and any souvenirs/snacks the student would want.
- ◆ There may be a pool at the hotel, so bring swimwear if you wish.

[PARENT CONSENT & RELEASE]

As a parent/legal guardian of:

(name of participant)

I give my permission for the above mentioned participant to attend Church at the Bay's Student Ministry Trip to Jr. High Believe.

I do hereby release, forever discharge and agree to hold harmless Church at the Bay, the directors, staff and volunteers from any and all liability, claims or demands for and hereby assume all risk for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and/or the student participant while the student is participating in activities, trips or events sponsored by Church at the Bay's Student Ministry.

I hereby grant Church at the Bay, or any adult acting on their behalf permission to seek medical attention and hereby authorize medical treatment as necessary and assume the responsibility of all medical bills, if any.

I understand that if my son and/or daughter cannot follow the trip rules, then he or she may be sent home at my expense. I commit to pray for the safety and spiritual growth of my young person while they are on the trip.

Parent/legal guardian signature

Parent/legal guardian printed name

Date

[REGISTRATION INFO]

Student's Name

Address

City, State, Zip

Home Phone Number

Student's E-mail Address

Emergency Contact Phone

Health Insurance Company

Insurance Policy No.

(include photo copy of insurance card)

Grade: 6 7 8 9 10 11 12 (circle)

Special Concerns or Other Information
(allergies, medications, etc.)

Church at the Bay Student Ministry

**CHURCH AT THE BAY
STUDENT MINISTRY**

**Jr. High "Believe"
Conference**

March 12-13

