



ReGeneration
Youth Retreat
Leader Packet

Packing list:

- Towels
- 2 Pairs of Shoes (1 pair should be appropriate for running around in the snow)
- Sleeping bag and pillow, or other twin sized bedding
- Clothing for 3 days
- Snow gear (warm boots, thermals, winter sports clothes, extra socks, jackets, etc.)
- Bible
- Notebook
- Pen or Pencil
- Toothbrush and Toothpaste
- Soap and Shampoo
- Camera (optional)
- Any missing paperwork or payments
- Approximately \$20 for Snack Shop purchases (snacks, clothing, souvenirs, etc.)

What not to bring:

- Tobacco in any form, including vaping
- Alcohol
- Illegal drugs or non-prescribed medications, including marijuana
- Inappropriate reading material
- Clothing with potentially offensive words or graphics
- Fireworks or other explosive materials
- Firearms
- Knives
- Items that may be perceived as a weapon
- Expensive electronics.

Rules

- Be encouraging
- Be in prayer
- Be involved
- Do not enter dorm rooms of the opposite gender
- No food or beverages (except water) in any of the guest rooms, lodges, or cabins. Personal snacks may be stored in the snack shop
- Stay with or near group leaders
- Stay off the ice unless you are with a leader during the polar plunge
- Please leave all furniture where you found it
- Everyone back in rooms by 11:30pm and lights out by midnight.
- Please respect others and the Lakeside property
- Pranks, bullying, or inappropriate use of social media may result in removal from the retreat

ReGeneration Youth Retreat Camper Information / Permission and Release

Group Name: _____

Group Leader's Name: _____

Camper Name: _____

D.O.B. _____ Gender _____ Grade _____

Street Address: _____ City: _____

State: _____ Zip Code: _____

Email _____

Parent/Guardian Name: _____	Parent/Guardian Name: _____
Home Phone # _____	Home Phone # _____
Cell Phone # _____	Cell Phone # _____
Email: _____	Email: _____

Medical Information:

Date of last Tetanus Shot: _____

Known allergies, medical problems or physical limitations:

Person to contact in case of emergency (if parents not available):

_____ Relationship: _____

Phone # _____

Insurance Information

Insurance Company _____ Policy # _____

Group # _____

Name of Policy Holder: _____

If no insurance, I agree to pay for any necessary treatments

Parent/Guardian Signature

Date

Permission Statement

I have requested that Lakeside Christian Camp allow my child to participate in the ReGeneration Youth Retreat, February 1-3, 2019. As a condition of receiving this benefit, I, the undersigned, do hereby agree to the following:

I understand that participation in this activity can expose my child to dangers both from known and unanticipated risks. Acknowledging that such risks exist, I hereby release and discharge Lakeside Christian Camp, its Board members, its Trustees, its officers, agents, and employees from any and all claims or liability for personal injury or property damage my child may suffer while participating in the activity; including, but not limited to, any claim arising out of any condition of the premises at which the activity is held or the conduct of any person in connection with the preparation for, supervision of, or conduct of any activity, whether planned or unplanned. I specifically agree to release and hereby release Lakeside Christian Camp and its Board members, its Trustees, the officers, agents, and employees of the camp for any negligence of the camp, or its Board members, its Trustees, its officers, agents or employees.

Parent/Guardian Signature

Date

I hereby give my permission for Lakeside Christian Camp to use any photograph, video, or voice recordings of my child taken at the ReGeneration Youth Retreat 2019, in future promotional materials, that may include, but is not limited to brochures, flyers, e-mails, television, website, or internet. Furthermore, I waive the right to royalties or other compensation arising from or related to the use of the images, recordings, or materials. I hereby release, defend, indemnify and hold harmless Lakeside Christian Camp against any claims, damages or liability arising from or related to the use of the images, recordings or materials.

Parent/Guardian Signature

Date

In an emergency, I hereby give permission to the physician or hospital selected by the camp director to hospitalize, secure the proper diagnostic, laboratory and radiological procedures, and to order any necessary medications, injections, anesthesia, intravenous therapy, or surgery for my child as named above.

Parent/Guardian Signature

Date

I understand that I bear full financial responsibility for any willful destruction, damage or defacing of camp property by my camper, including land, buildings, furniture, and equipment.