

**Heartland COGOP Winter Retreat
Cross Pointe Camp & Retreat Center
January 1-3, 2016
Ages 13 and up**

Cost:

Early bird (application postmarked before Dec. 1st) - \$75 plus a free t-shirt
Between Dec 2-15 - \$80 plus a free t-shirt
After Dec. 15th - \$80 (no shirt) and bring app and \$\$ with you.

Registration begins at 1:00pm Friday in the basement of the gymnasium (drive to the back of the building, near the pool). Dinner will be at 5:00pm.
***If you wish to come sooner than 1pm, that is fine. (Lunch will not be available, snack shack will.**

FIRST!!

**If you are planning to attend, please contact
Mykala Shaver by either calling, texting or emailing. THANKS!
660-441-5869
mykala.shaver@heartlandcogop.org**

Checks can be made payable to Church of God of Prophecy.

Name: _____ Male [] Female []
Address: _____
City/State/Zip: _____
E-mail address: _____
Phone Number: _____
Birth date: ___/___/___ Age: _____
Church attending: _____
Pastor: _____
City/State: _____

In case of emergency, notify: _____
Relationship to retreator: _____
Phone number: _____

Retreat location: Cross Pointe Camp and Retreat Center is located on the Lake of the Ozarks at the 6 mile marker. The campground is at the end of Y Highway off of 5 Highway out of Eldon, Missouri. Please use the following address in your GPS or www.mapquest.com: 31434 Main Street, Rocky Mount, MO. Follow the signs to Cross Pointe. If you drive into the lake, you've gone too far.

MEDICAL INFORMATION—Please print clearly.

Indicate with a check mark (✓) any of the following medical conditions that apply.

Please provide the date of the most recent occurrence when applicable.

- _____ ADD/ADHD
- _____ Asthma
- _____ Diabetes
- _____ Heart trouble
- _____ Kidney trouble
- _____ Recent operations
- _____ Seizures
- _____ Physical disability

- _____ Sleepwalking
- Serious allergic reactions to:
- _____ Anesthesia
- _____ Food
- _____ Hay fever
- _____ Insect bite
- _____ Medication
- _____ Poison ivy, oak, or sumac

INSURANCE INFORMATION

- Policy holder's name: _____
- Insurance company: _____
- Policy number: _____
- Group/ID number: _____
- Billing address: _____
- _____ I do not have medical insurance.

If you checked any of the above, please explain.

Please list other medical concerns _____

→Family doctor: _____ Phone number: _____

MEDICAL EMERGENCY: I understand that reasonable effort will be made by the retreat staff to contact me, the parent/guardian, in case of an emergency. If I cannot be reached at the time of the emergency, I hereby give permission to the director, medical attendant, or designee thereof to secure proper medical treatment including, but not limited to, pre-hospital care and transport, hospitalization, ordering injections and/or anesthesia, surgery for the retreat attendee and all treatment directed by proper medical professionals. I understand that I am responsible for all medical charges incurred, and I will reimburse the Heartland Church of God of Prophecy for any charges paid.

I have read and understand the information on this application and give my child permission to travel across state lines (if applicable) to attend retreat and to travel with retreat staff during the period of the retreat. I will not hold the Heartland Church of God of Prophecy liable for any injury that might occur during the retreat or in the transport to or from the retreat.

I also grant permission to the retreat medical attendant to administer over-the-counter medications such as Tylenol, Pepto Bismol, and sinus/allergy medications to my child as needed.

_____ Check here if you DO NOT want the retreat medical staff to administer over-the-counter medication to your child.

SIGNATURE _____ **Date** _____

IMPORTANT: Signature of parent or legal guardian is required for children under 18 years of age.

There will be a snack shack, so bring money, if desired. You'll also want to pack bed linens, bathroom linens, personal hygiene supplies, and clothes for activities and church. Most importantly, bring your Bible, some note-taking materials, and a great attitude. Can't wait to worship with you!

RETREAT USE ONLY

Tuition paid: cash _____ check _____

Check # _____