

# Special Sessions for Confirmation Students

## Presbytery-wide YOUTH RETREAT February 10-12, 2012

- This retreat is sponsored by the Presbytery Congregational Nurture Committee.
- Middle & High youth will have opportunities for fun, fellowship, Bible study and worship as they renew and develop friendships from across the Presbytery.
- The retreat will be held at Camp Akita from 7 pm Friday, February 10 through 10 a.m. Sunday, February 12, 2012.
- Special **Confirmation sessions** will cover Presbyterian Polity, History and Theology.
- Please bring: Bible, warm clothes, 2 pairs of shoes, sleeping bag, pillow, toiletry items.
- Any medications taken routinely should be brought in original packaging/bottle that identifies prescribing doctor, name of medication, dosage, and frequency of administration.
- **Adult leaders are to register and stay for the entire retreat, 1 leader for every 1-5 students of the same sex, please. Adult leaders are responsible for their youth at all times.**
- Youth are not to bring personal electronic devices, such as electronic games, CD players, iPods. Cell phones for emergency use only.

**Camp Akita (740/385-3827)** is located 30 miles southeast of Columbus off US Route 33  
- Travel 7 miles south from downtown Lancaster (Routes 33 & 22/188)  
- Turn east at the light on Rt. 33 to the village of Sugar Grove  
- Travel 1/10 mile, turn right onto "Fairfield County Road 65" crossing the metal bridge and follow County Road 65 for 3 miles to the white church at the top of the hill  
- Follow the signs with the Akita logo  
- Turn right at the white church onto Hurst-Hill Road  
- Follow Logan Hornsmill Road for 2.7 miles to Camp Akita main entrance, 29746 Logan-Hornsmill Rd.

Please mail this

### Registration Form & Payment to:

Presbytery of Scioto Valley (PSV)  
6172 Busch Blvd. Suite 2048, Columbus, Ohio 43229

Camper/Adult Name: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ Gender: \_\_\_\_\_  
Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Grade: \_\_\_\_\_

Church: \_\_\_\_\_

Special Needs/Allergies/Medications: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_

Insurance Policy Number: \_\_\_\_\_

Copy Registration Form as Needed: One per person.

### COST

**\$70 for each registered youth**

**\$35 for each registered adult chaperone**

**Space is limited, so register early.**

**Deadline is February 1st.**

I, the undersigned, being the parent or legal guardian of the child named above, permit my child to participate in all camp activities and certify that the above information is correct. I give permission for my child/me to be photographed during camp activities and for the Presbytery to use such photographs in publicity. I give permission for PSV to administer prescribed medications and provide routine health care. I understand the presbytery will not be responsible for medical expenses incurred, but that such expenses will be my responsibility as parent/guardian. In the case of accident/injury, I give PSV permission to seek medical attention for my child/me and arrange necessary transportation and I understand that if my child needs emergency care that PSV will attempt to contact me immediately.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Cell Phone or Emergency Number: \_\_\_\_\_