

# ADHESION FALL RETREAT: LESSONS FROM JAMES AT LAKE GENEVA YOUTH CAMP

**WHEN:** Friday, October 11<sup>th</sup> – Sunday, October 13<sup>th</sup>

Depart from Hosanna! @ 4:30pm Friday. Return for 11:00am service on Sunday

**WHERE:** Lake Geneva Youth Camp: W2655 W South St, Lake Geneva, WI 53147

**COST:** \$130 – Includes 5 meals and all activities

*(Contact Valeri for scholarship information)*

**PURPOSE:** The New Testament book of James offers some very blunt and practical life lessons. Over the course of the weekend we will be learning how nothing we experience is wasted because of God's good plans for us, and how we can follow God wholeheartedly. We will explore these principles through Bible study, hands-on activities, and experiencing challenges in the Lake Geneva area.

*(Activities may include but are not limited to: team building activities, hiking, obstacle courses, etc.)*

## **WHAT TO BRING:**

- Comfortable clothes** – be prepared for both warm and cool weather & outdoor activities
- Close-toed walking shoes**
- Water Bottle**
- Modest pajamas**
- Toothbrush/toothpaste + other personal toiletries**
- Towel**
- Bible, notebook, pen**
- Sleeping Bag + Pillow**

## **PARTICIPANT EXPECTATIONS:**

- **Inclusive of all event participants – no one will be left out**
- **Only positive and uplifting words and conversations**
- **Respect those leading activities by listening and engaging in activities with a positive attitude**
- **Respect lights out time and room assignments for sleeping. Students MUST remain in assigned rooms after lights out unless granted permission from event chaperone.**

## **CELL PHONE POLICY:**

Students are welcomed to bring their phones to this event. However, please be aware there may be times students are requested to put their phones away during certain activities to help enhance the experience.

Parents/Guardians may get in contact with their son or daughter at any time during the event by contacting Valeri Schuberg (Director of Youth Ministries) at (630) 797-6625.

## **PLEASE KEEP THIS FLYER FOR YOUR REFERENCE**

Contact Valeri Schuberg (Director of Youth Ministries) for more information  
(630) 584-6434 x 111 or ValeriS@HosannaChurch.com

CHECK-IN ON ACTIVITIES DURING THE TRIP BY VISITING [INSTAGRAM.COM/ADHESION\\_HOSANNACHURCH](https://www.instagram.com/adhesion_hosannachurch)

Hosanna! Youth Ministries  
**FALL RETREAT: LAKE GENEVA YOUTH CAMP**  
[October 11-13, 2019]

**General Registration Information (one person per form please):**

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

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

Address: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

Parent Cell Phone: \_\_\_\_\_ Student Cell Phone: \_\_\_\_\_

Emergency Contact and Phone Number: \_\_\_\_\_

Allergies or Dietary Needs: \_\_\_\_\_

Medications: \_\_\_\_\_

**Participation Consent:**

I hereby certify that I give permission for the individual listed above to participate in the Adhesion Fall Retreat with Hosanna! Lutheran Church during the dates described above. I give permission to participate in all trip activities. The participant listed above has been instructed to cooperate with church leaders and adult volunteers and knows that failure to abide by established rules may result in removal from certain activities and, in some cases, being sent home at our expense. I consent to allow appropriate photographic and/or video images to be taken and used to promote future events or activities by Hosanna! Lutheran Church. I also agree to hold Hosanna! Lutheran Church or any directors, employees, or volunteers connected to the trip harmless of any liability related to participation in event activities. By signing this form, I authorize the assigned leaders (whether staff or volunteer) of Hosanna! Lutheran Church, or another designated person, to make decisions in their best judgment regarding any and all medical care. It is understood that effort shall be made to contact the undersigned prior to rendering emergency treatment, but that treatment will not be withheld if the undersigned cannot be reached.

\_\_\_\_\_  
Parent/Guardian Name (Printed)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date