


Spring Folly Registration Form 2017

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|  <p>www.springfolly.com April 28-30, 2017</p> | <p>FEES:</p> <p>Before March 31st - \$85</p> <p>After March 31st - \$95</p> <p>Youth Leader \$20</p> | <p>Church/ Youth Group Name:</p> <hr/> <p>Youth Leaders Name:</p> <hr/> |
| <p>Completed forms must be postmarked by March 31st to qualify for the EARLY REGISTRATION RATE!</p> <p>Mail forms and payment to: Spring Folly, P.O. Box 70, Richards Landing, ON, POR 1J0</p> | | |

PERSONAL INFO:

Name: _____ Circle one: Student or Youth Leader Age: _____

Birthday: D ___ M ___ Y ___ Gender: Male Female

Health Card # _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone # to best reach guardian: _____

Name of Family Doctor: _____ Phone #: _____

Allergies: _____ Medications we should know about: _____

Physical disabilities, limitations or recent illnesses we should be aware of: _____

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| <p>ACCOMMODATIONS:</p> <p>Students staying at CASS (Central Algoma Secondary School) MUST be accompanied by a youth leader. Please circle one:</p> <p style="text-align: center;"> <input type="radio"/> staying at CASS <input type="radio"/> staying at home <input type="radio"/> staying with friend/family member </p> <p>If you are staying with a friend or family member during the weekend, please provide their information below.</p> <p>Name: _____ Phone: _____</p> | <p style="text-align: center;">Use of Images</p> <p>Promotional photos are taken throughout the weekend. Please sign below to give permission for the use of your image.</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">signature</p> <p><input type="checkbox"/> I do not give photo consent</p> |
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| <p style="text-align: center;">STUDENT COOPERATION AGREEMENT</p> <p>We are happy to have you at Spring Folly and have prayed for your attendance. We hope you have a great time, make new friends and grow closer to God. To ensure an enjoyable weekend, we have a few simple rules.</p> <p style="padding-left: 40px;">Be respectful to others and their property.</p> <p style="padding-left: 40px;">If you break it, you pay for it.</p> <p style="padding-left: 40px;">Alcohol, drugs and weapons are not allowed.</p> <p style="padding-left: 40px;">You may not leave the grounds without permission.</p> <p><i>NOTE: We can not be responsible for lost or stolen items. Please leave valuables at home.</i></p> <p>I have read the above agreement and will abide by it. I understand that if I do not abide by these standards, my parent(s) will be notified and I may be sent home.</p> <p>Student Signature: _____</p> <p style="text-align: right;">Date: _____</p> | <p style="text-align: center;">PARENTAL AGREEMENT</p> <p>I give my permission for the above student to join the Spring Folly retreat and participate in all group activities.</p> <p>In the event of an emergency, I authorize the leader of my child's youth group or a retreat leader in charge of medical care to consent to any x-rays, medical, dental or surgical diagnosis, treatment and hospital care as advised and supervised by an appropriate physician who is practising under the laws of Ontario. I expect to be contacted as soon as possible in the course of such an event.</p> <p>I also understand that if my child is in breach of the student cooperation agreement, I may be required to pick them up from the retreat immediately.</p> <p>Parent/ Guardian Signature: _____</p> <p style="text-align: right;">Date: _____</p> |
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Spring Folly is for students aged 14 (by December 31, 2017) to 20