



GATHERING FOR RELATIONSHIP: PRE-ELCA YOUTH GATHERING RETREAT

Congregation Registration & Payment form

Congregation(s) _____

City/Town _____

Primary Leader _____

Contact information should be where the Primary Leader can be reached easily with confirmation information and questions.

Street Address _____

Email Address _____

City _____

State _____

Zip _____

Phone Number _____

Registration Fees

Registration is \$20 per person

Fee covers: Friday night lodging and Saturday breakfast & lunch

Total number of Retreat participants (youth and adults): _____

Total Fee @ \$20 per person: _____

ALL REGISTRATION FEES AND FORMS ARE **DUE BY JANUARY 15TH, 2018**

Please make payments payable to:

ECSW, please also include "EYG Retreat" in the memo line

Please mail Registration form, health forms and registration payment in full to:

Darlene Kalfahs
ECSW
16 Tri-Parkway
Appleton, WI 54914

For any questions, comments or concerns please contact:

Patrick Kieper
FirstEnglishYouth@gmail.com

Congregational Registration Information

- Please type or print the name of each participant according to leader and gender group. All groups must have one adult leader (21 years of age or older) for each group of 8 youth of the same gender.
- You may share adult leaders with other groups (i.e., 2 male youth from church X and 3 male youth from church Y with one adult leader from church X). It is the responsibility of the Primary Leader to arrange "leader sharing" and these groups should register together as one group on one Retreat Registration form.
- Congregations will assume ALL responsibility (property, financial, etc.) for their group throughout the entire gathering.
- Congregational groups may be combined or mixed with other groups to best utilize our cabin spaces at the retreat, for youth retreats it is required that at least 1 adult of the same gender be housed in the same cabin.
- All participants (both youth and adults) must complete a Health History form for Crossways Camping Ministries. The Primary Leader must send these forms with registration to have on site during the event.

Please complete the registration information on the next page

Participant Information (please make extra copies of this page as needed)

	Name	Gender	Age	*Dietary restrictions/Environmental needs
Adult				
Youth				
Youth				
Youth				
Youth				
Youth				
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Youth				
Youth				

*If someone has a need that affects others (for example, some peanut allergies are such that no one can have peanut products), please be sure that is clear so that we can maintain a safe and healthy environment for everyone.