

# 2017 FALL WORKSHOP REGISTRATION

to pay in full by credit card

register online at  
[wvumc.org/about/youth/fallworkshop](http://wvumc.org/about/youth/fallworkshop)

## YOUTH INFORMATION

Youth Name				Date of Birth	
Address				Male <input type="checkbox"/>	Female <input type="checkbox"/>
City		State		Zip	
Youth Cell Phone				Grade	
Home Church				District	
Roommate Choice (max of 2 choices – all parties (must request each other)	(1)		(2)		

## PARENT/GUARDIAN INFORMATION

Parent/Guardian Name	Home Phone	
Email	Cell Phone	

**WORKSHOPS CHOICES** (Each youth will attend 2 workshops. Please select your top 3 choices. If you select choir you will not have to select alternates. This workshop continues from the first session.)

1	Science	5	Sacraments
2	Prayer Stations	6	Bible Exploration
3	What's Cool	7	Listen Well
4	Love your Body	8	Games

**Workshop Selection:** 1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_ 3<sup>rd</sup> Choice: \_\_\_\_\_

**SHIRT ORDERS** (Registration must be received before November 1 to receive a shirt.)

Short Sleeve T-Shirt (included): S: \_\_\_\_\_ M: \_\_\_\_\_ L: \_\_\_\_\_ XL: \_\_\_\_\_ XXL: \_\_\_\_\_

## EMERGENCY CONSENT PERMITTING CARE OF MINORS

If the staff of the youth event has to bring your child to the Emergency Room facilities for treatment, any person under 18 years of age cannot authorize treatment for him/herself. To assist your child in obtaining treatment, please complete the form below.

I, the undersigned parent or guardian, do hereby grant permission for the above named applicant to attend the youth event. In order that my child may receive the necessary medical treatment from the medical staff of an area hospital, I hereby consent to medical treatment for my child for such injury or illness during the youth event and authorize the adult or event staff to obtain such treatment. I hereby release and discharge the responsible adult, event staff, the Conference Council on Youth Ministries, the WV Conference and the event location from any and all debts, judgments, or suits of any kind that may arise or be occasioned as a result of the applicant's participation in the youth event. I further acknowledge and understand that while participating in the youth event there is a possibility of physical illness or injury and that my child assumes the risk for such illness or injury by his/her participation.

\_\_\_\_\_  
Parent/Guardian Name - printed

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

## EMERGENCY CONTACT AND MEDICAL INFORMATION (Please attach additional sheet if more space is needed.)

Name		Name	
Relationship		Relationship	
Phone		Phone	

Special Medical Conditions: Yes <input type="checkbox"/> No <input type="checkbox"/>	Explain: _____
Allergies: Yes <input type="checkbox"/> No <input type="checkbox"/>	List: _____
Current Medications: (please include over-the-counter)	List: _____

## PAYMENT INFORMATION (to pay in full by credit card – please register on-line at [wvumc.org/fall-workshop](http://wvumc.org/fall-workshop))

Form and payment should be mailed to : Conference Treasurer PO Box 2469 Charleston, WV 25329	Please include "fall workshop" on check memo line.	Check Number _____	Amount Enclosed \$ _____	Amount Due \$ _____
Who is paying the amount due? _____				

Office Use Only	Batch Number
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# WORKSHOP DESCRIPTIONS

**Workshop Title: Science**

Leader: Leann Haines

Age Range: All Fall Workshop attendees

Description: Hands-on experience with science and faith!

**Workshop Title: Prayer Stations**

Leader: Joe Webb

Age Range: All Fall Workshop attendees

Description: Learn about different ways to pray and how to incorporate prayer into your daily life. You'll be able to learn about prayers that use touch, sound, and movement- you won't be sitting still and being quiet the whole time, I promise!

**Workshop Title: What's Cool**

Leader: Jeremy Daniels

Age Range: All Fall Workshop attendees (Middle Schoolers – AM; High Schoolers – PM)

Description: It can be hard to be cool, but it doesn't have to be! Honest conversations about what it means to be cool, you'll talk about: confidence, social media, drugs/alcohol, clothes, and the difference between "trying" to be cool, and being cool because you're being you!

**Workshop Title: Love your Body**

Leaders: Joe Hill and Shea James

Age Range: All Fall Workshop attendees (High Schoolers – AM; Middle Schoolers – PM)

Description: Bodies - We all have them! How can you love the body you've got? How do we take care of the bodies God has entrusted to us? Bodies can be used for good, and they can be abused. Join Joe and Shea for a frank discussion about bodies which will include (but is not limited to!): being active, self-acceptance, sex, and eating well!

**Workshop Title: Sacraments**

Leader: Bishop Sandra Steiner Ball

Age Range: All Fall Workshop attendees

Description: The sacraments of Baptism and Communion can be confusing topics. Join Bishop Sandra Steiner Ball and ask her any questions you may have about them!

**Workshop Title: Bible Exploration**

Leader: David Johnston

Age Range: All Fall Workshop attendees

Description: David Johnston knows some pretty awesome hacks for reading the Bible, and he is willing to share them with you! Come and learn about different ways to engage with Scripture, so that you can incorporate the Bible for a lifetime of spiritual formation.

**Workshop Title: Listen Well**

Leader: Schauna Chambers

Age Range: All Fall Workshop attendees

Description: God speaks to us all the time! Listen for gospel themes and faith messages in different songs!

**Workshop Title: Games**

Leaders: Spring Heights Staff

Age Range: All Fall Workshop attendees

Description: Want to spend some time running around and having fun? Spring Heights, the West Virginia Annual Conference United Methodist Camp, based out of Spencer, WV specializes in fun and faith formation. Join some of our summer staff for games and glimpses of God's goodness!