

OCTOBER  
**3-5**  
2016



**REGISTER BY SEPTEMBER 19**  
**FELLOWSHIP WORSHIP RENEWAL**

## **CENTRAL CONFERENCE EVANGELICAL COVENANT CHURCH PASTOR & SPOUSE RETREAT COVENANT HARBOR BIBLE CAMP, LAKE GENEVA WISCONSIN**

The Evangelical Covenant believes that Scripture is central to Christian life and that reading together binds our life together. Believing this is one thing. Doing it is another. Given the complexity of the word and our world, is it really possible for diverse Christians to find unity and community in Scripture? We hope so! Our Ministerium is proud to welcome Superintendent, Pastor Jerome Nelson & Dr. Michelle Clifton-Soderstrom to lead us in worship and continued education around this theme:

### **“Reading the Bible in a Complex World”**

In opening and closing worship, **Pastor Jerome Nelson**, in his last year as our superintendent will care for our community as he preaches from Colossians 3:1-17 offering us some parting words as he bring us together around Word & Table.

Then in 3 sessions **Dr. Clifton-Soderstrom** will care for our continued education and fellowship together. First, she will focus on our

Pietist heritage as it informs how and why we read the Bible. Then we will engage Philippians 2 as it offers a helpful model for discussing the relationship between power and obedience in interpreting Scripture. Finally we will imagine some faithful practices and habits of readers and the role that friendship plays in building community around God's word.



Dr. Michelle Clifton-Soderstrom is Professor of Theology & Ethics at North Park Theological Seminary and ordained to word and sacrament in the Evangelical Covenant Church. She is author of *Angels, Worms, and Bogeys: The Christian Ethic of Pietism* and co-author of *Incorporating Children in Worship: Mark of the Kingdom*. Michelle is a passionate advocate for people and groups who are marginalized in society and in the church. Her interests include virtue ethics, Christology, children, women's participation, and education for persons who are incarcerated. Michelle also works as an ethics consultant for Covenant Retirement Communities and serves on the editorial board for the *Journal of the Society of Christian Ethics*.

**Pastor Jerome Nelson** is an ordained Covenant Pastor and graduate of North Park Theological Seminary. Before going to work for the Central Conference in 1999, he pastored the Covenant church in Gary, IN, which was adopted into the Covenant in 1986. He has been a Covenant for over 30 years and has been in pastoral ministry for over 40 years. He has also been very actively involved in denominational ministries, including serving on the Board of the Ordered Ministry, and more recently serving as chairperson of the Council of Superintendents. He and his wife Joanne have been married for 39 years, have 3 adult sons and live in Evanston, Illinois.

**Join us for a time of Spiritual Renewal  
for Pastors, Staff Ministers & Spouses.**



### **Registration:**

registration & payment due by September 19.

### **Questions:**

Please feel free to contact Covenant Harbor or, email the retreat committee at [ccma.committee@gmail.com](mailto:ccma.committee@gmail.com)

### **Golf Note:**

Coming early to golf? Covenant Harbor offers two recommendations: Hawksview Golf Course in Lake Geneva has two 18 hole courses, Como Crossing for \$45 including cart; and Barn Hollow for \$25 including cart; Barn Hollow for \$13 without a cart.

### **Transportation:**

If you would like to **ride with someone** or can offer a ride email our committee at [ccma.committee@gmail.com](mailto:ccma.committee@gmail.com)

### **Directions to camp:**

Directions can be found at [www.covenantharbor.org](http://www.covenantharbor.org)

### **Scholarships**

A limited number of \$75 scholarships are available from the Central Conference. If a scholarship would help you attend, please indicate that on your registration form or call the conference office to make that request, (773) 267-3060.

### **Spiritual Direction:**

With the ministry of spiritual direction being more wide spread, we will only offer spiritual direction on a request basis only. If this is something that is not available for you in your area of ministry or you wish to meet with a spiritual director while on the Pastor's Retreat, **please contact** the Central Conference's regional coordinator for the Spiritual Direction Network, Neil Taylor at [neil@jpusa.org](mailto:neil@jpusa.org).

### **Optional Forums**

**Central Conference:** Jerome Nelson and members of the conference staff will offer an update of what is happening in the conference; **NPTS** Dave Kersten will offer reflections on the state of our seminary & theological education.



### **Retreat Schedule:**

#### **Monday, October 3**

- 4pm Check-In & Arrival
- 6pm Dinner
- 7:30pm Opening Worship  
Pastor Nelson preaching

#### **Tuesday, October 4**

- 7am Early Morning Coffee
- 7:45am Morning Prayer
- 8:30am Breakfast
- 9:30am Session I: Dr. Clifton-Soderstrom
- 10:30am Coffee & Fellowship
- 11am Session II: Dr. Clifton-Soderstrom
- 12:15pm Lunch
- 1:00pm Free Time
- 1:15-2:15 Optional Forums  
(to be announced)
- 5pm Open Conversation  
(with our Covenant & Camp Leadership)
- 6pm Dinner
- 7:30pm Session III: Dr. Clifton-Soderstrom  
Evening Prayer

#### **Wednesday, October 5**

- 8am Worship: Word & Table  
Pastor Jerome Nelson
- 9:30am Brunch
- 10am Check-Out & Departure



Central Conference Pastor & Spouse Retreat  
October 3-5, 2016

1724 W Main St, Lake Geneva WI 53147  
Phone: 262.248.3600 Fax: 262.248.6814  
Email: camp@covenantharbor.org  
www.covenantharbor.org

Family Information - Used for all correspondence, billing and emergency contact.

1-Last Name of person attending the retreat	1-First Name	Gender	1-Home Phone
1-Work Phone	1-Cell Phone	1-Email Address	
2-Last Name (list if your spouse is attending the retreat)	2-First Name	Gender	2-Home Phone
2-Work Phone	2-Cell Phone	2-Email Address	
Mailing Address	City	State	Zip Code
Church You Attend	City	State	Denomination

Choose Your Lodging and Meal Plan

**Staying at Camp** - Lodging assigned on first-come, first-serve basis

☐ Geneva Bay Center (GBC)-2 in a room \$205/person; 2 nights + all 5 meals + program  
Name of roommate / spouse name:\_\_\_\_\_

☐ Geneva Bay Center (GBC)-3 in a room \$185/person; 2 nights + all 5 meals + program  
Name of roommates:\_\_\_\_\_

☐ Camp Housing \$150/person (shared housing); 2 nights + all 5 meals + program; bring linens

☐ Camp Housing \$120/person (shared housing); 1 nights + 3 meals + program; bring linens  
**Indicate the 3 meals you will eat by checking 3 meals below:**  
☐ Mon. Dinner ☐ Tues. Breakfast ☐ Tues. Lunch ☐ Tues. Dinner ☐ Wed. Brunch

**Commuter with No Housing**

☐ Commuter, Full Time \$105/person; all 5 meals + program

☐ Commuter, Part Time \$55/person; 2 meals + program  
**Day(s) you are attending:** ☐ Mon. ☐ Tue. ☐ Wed.  
**Indicate the 2 meals you will eat by checking 2 meals below:**  
☐ Mon. Dinner  
☐ Tues. Breakfast ☐ Tues. Lunch ☐ Tues. Dinner  
☐ Wed. Brunch

**Meals for Children**  
Indicate on the lines below the total number of children (over 2 years old) who will be eating at each meal

\_\_\_\_Mon. Dinner \_\_\_\_Tues. Breakfast \_\_\_\_Tues. Lunch \_\_\_\_Tues. Dinner \_\_\_\_Wed. Brunch    **Total # of children meals** \_\_\_\_ x \$5 each meal = \$ \_\_\_\_\_

**Children** - List each child attending the retreat with you. *List additional children on the back. Include all information.*

Last Name	First Name	Middle Initial	Age	Gender (circle one): M F	<input type="checkbox"/> This child will need childcare during programmed events
Last Name	First Name	Middle Initial	Age	Gender (circle one): M F	<input type="checkbox"/> This child will need childcare during programmed events
Last Name	First Name	Middle Initial	Age	Gender (circle one): M F	<input type="checkbox"/> This child will need childcare during programmed events

**Other Items:**

☐ I need a \$75 scholarship to attend (deduct \$75 from total owed).

**Dietary Restrictions or Special Accommodations** needed, *include name:* \_\_\_\_\_

**Consent and Release** - I hereby give my consent to have the above-named Campers fully participate in all camp activities, outings and field trips conducted on and off the campus of Covenant Harbor recognizing that there are risks known and unknown, foreseeable and unforeseeable involved in participating in these or similar activities. Covenant Harbor has taken reasonable and prudent steps to reduce known and foreseeable risks. I understand activities may be strenuous and/or outdoors and agree that participation in activities is voluntary. I understand and agree that neither Covenant Harbor nor its trustees, officers, directors, employees, agents or representatives may be held liable in any way for any injury, harm, damage or death which may occur to the above Campers as a result of participation in these activities and hereby release, save and hold harmless the above mentioned of said injury due to participation in these activities. Further, I do consent to any and all medical treatment that may be deemed necessary for the Campers should he/she require such assistance. I agree that my insurance plan is the primary plan to pay for the medical, dental or hospital care or treatment that is given to the Campers. I agree to allow Covenant Harbor to transport Campers as needed and to use a photocopy of this form as my authorization when necessary. Covenant Harbor may use the Camper's photo, films, digital images, videotapes and sound recordings in future promotional materials. I have read and voluntarily agree to the statements herein.

This release is approved for the following campers ( list all) \_\_\_\_\_

Signature of Adult 1 (listed above) \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Adult 2 (listed above) \_\_\_\_\_ Date: \_\_\_\_\_

**Method of Payment**

☐ Check enclosed payable to Covenant Harbor. A \$15 processing fee will be charged for checks returned by the bank for non-sufficient funds (NSF checks).

☐ Credit Card Payment (*full fee plus \$5 processing fee*)    Type: ☐ Visa ☐ Master Card

Credit Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_    Expiration Date \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Authorized Signature **X** \_\_\_\_\_