



Youth Mission Team Presents  
**Missouri Union Presbytery**

# **FALL Youth Retreat**

For all youth grades 6<sup>th</sup> through 12<sup>th</sup>

**November 1st & 2nd, 2019**

**MISSION:  
POSSIBLE**

**FIRST CHRISTIAN CHURCH**

**MARSHALL, MISSOURI**





Youth Mission Team Presents  
Missouri Union Presbytery  
**Fall Youth Retreat**

**MISSION:  
POSSIBLE**

**BEGINS:** Friday, November 1, 2019 @ 7:00pm  
**ENDS:** Saturday, November 2, 2019 @ 7:00pm

**HOSTED BY:** Covenant Presbyterian Church of Marshall

**SITE LOCATION:** First Christian Church  
130 N. Jefferson Ave, Marshall, MO 65340

**COST:** \$20 Covers 3 meals on Saturday and all activities  
*Make checks payable to "MUP" or "Missouri Union Presbytery"*

**WHAT TO BRING:** Bible; sleeping bag; pillow; air mattress (if desired); flashlight; weather appropriate clothing (dress layers), "old clothes" that can be worn while doing service around the town; comfortable tennis shoes fit for running/ walking; jacket; and personal items.

**WHO CAN COME:** ALL YOUTH GRADES 6TH THROUGH 12TH

**QUESTIONS:** Contact the Youth Mission Team

Michael Moore - Mexico (573-473-1741)  
Mary Riley - Moberly (573-489-1929)  
Jason Hilkerbaumer - Camp (573-307-0650)  
Michele Yoder - Kirksville (618-830-1222)  
**Contact the Site Coordinator**  
Rachel Guthrey - Marshall (660-815-3298)

**DEADLINE:** October 18, 2019

Parent Permission Form with Health and Prescription Card copies and the retreat cost, must be completed and returned to your Youth Pastor/Leader OR

Michael Moore, 400 Lakeview Rd, Mexico, MO 65265

# Missouri Union Presbytery - Release Form

## Fall Youth Retreat - November 1 & 2, 2019

### Participant Information

Name \_\_\_\_\_ ☐ Male Home \_\_\_\_\_  
\_\_\_\_\_ ☐ Female Church \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address, City/State/Zip \_\_\_\_\_ Participant Cell \_\_\_\_\_  
Participant Email Address \_\_\_\_\_  
*NOT Parent/Guardian Email*

T Shirt Size: ☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ XX-Large ☐ XXX-Large

### Parent/Guardian Information

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Email Address \_\_\_\_\_  
Other Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

### Medical Information

Current Prescription Medications: (Please list drug and dosage)

Name of the Family Doctor or Clinic: \_\_\_\_\_ Phone \_\_\_\_\_  
Health insurance carrier: \_\_\_\_\_ Policy/Group No. \_\_\_\_\_

***Photocopy of front and back of HEALTH INSURANCE CARD /PRESCRIPTION CARD must be with this form***

Medical Diet Restrictions: \_\_\_\_\_

Chronic or recurring illness or medical condition: (list and explain any info we would need to know)

**\*\*Please submit a physician's statement regarding any condition which may limit youth participation\*\***

**IMPORTANT - MUST BE COMPLETED FOR ATTENDANCE:** To my knowledge, this health history is correct and complete. The person described and named above has permission to engage in all camp activities except as noted. I give permission to Missouri Union Presbytery to provide routine health care, administer prescribed medications or Tylenol/Advil if needed, and seek emergency medical treatment including ordering x-rays or routine tests. I agree to the release of any records necessary for treatment, referral, billing, or insurance purposes. I give permission to Missouri Union Presbytery to arrange related transportation for me/my child. In the event I cannot be reached in an emergency, I also give permission to the physician selected by the Presbytery to secure and administer treatment, including hospitalization, for the person named above. This form may be photocopied for use of transportation. I give permission for my child/me to participate in all regular event activities and for pictures taken of me and/or my child during the retreat to be used for presbytery publicity, including but not limited to website or social media.

Participant/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_  
*if not over 18*

☐ Opt Out of photo release - Initial \_\_\_\_\_