

High School Winter Retreat Permission Slip

I consent to let my child, _____, participate in the Peace Lutheran Church (Lombard) – Middle School Winter Retreat at **Camp Timber-lee**, from **Friday, February 15 to Sunday, February 17, 2019**.

Parent/Guardian Signature: _____

Printed Name: _____ Date: _____

Home phone: _____ Cell Phone: _____

In case of emergency contact (other than parent):

Name: _____ Relationship: _____

Phone: _____

Does your child have any allergies and/or medical conditions that we should be aware of?

_____ Yes _____ No

If so, please list or explain: _____

I authorize an adult leader to administer the following over-the-counter medication to my child. (Check all that apply).

Ibuprofen _____ Pepto-Bismol _____ Imodium _____ Benadryl _____

I understand that all prescription medicines(s) sent with my child must be clearly labeled and turned into an adult leader when my child is dropped off. The adult leaders will administer all medications while we are on the retreat. (Please initial) _____

Sign only if you do not want your child's picture to be taken and to be used for Peace and/or Camp Timber-lee purposes for promotion or newsletters: _____

You may detach the bottom of this slip as a reminder

Peace Lutheran Middle School Retreat to Camp Timber-Lee

N8705 Scout Rd, East Troy, WI 53120

Friday, February 15 to Sunday, February 17

We'll meet to eat at 5 pm on Friday at Peace and return by 3pm on Sunday
(We might get back as early as 2:00. We will call ahead if it looks like we're going to arrive early.)

The cost is \$110 and includes Friday night's dinner.

Turn in permission slips by Sunday, February 6

Leather shop Projects, Trail rides, and Zipline. Zipline is \$10 and Trail rides are \$15

Need to reach us that weekend: Andrew Crist, Youth Director – cell # 417-569-3939