

## **SCHEDULE** (subject to slight tweaking)

### Friday, March 2

7:30-8:30 p.m.	Registration and Gathering Activities
8:30	Energizers/music/welcome
9:00-10:00	Small Groups
10:00	Snacks; adult orientation
10:30	Worship
10:45	Cabin devotions
11:15 p.m.	Lights out and in cabins for the night

### Saturday, March 3

8:00 a.m.	Breakfast
9:00	Energizers, music
9:20	Theme Explorations
Noon	Lunch
1:00 p.m.	Energizers/Music/Special Presentations
	Mission Project
	Recreation activities
3:30	Theme Exploration
5:00	Dinner
6:00	Energizers/Music
6:15	Small Group Skit Preparation
7:45	Large Group Community Recreation
9:45	Worship
10:00	Cabin devotions
11:00	Lights out and in cabins for the night

### Sunday, March 3

8:00 a.m.	Breakfast/pack/clean cabins
9:00	Energizer/Music
9:15	Theme Exploration
10:15-11 am	Worship

The Presbytery of West Virginia's Youth Council  
presents the:

## **2018 Younger Youth Retreat**

### **Lego<sup>(T)</sup> Your Doubt: *Building Blocks of Faith***



March 2-4, 2018  
Cedar Lakes Conference Center  
Ripley, WV

Focus: Even in the midst of our lives of faith, as children of God we all have times of doubt. Over the weekend, we will explore some of the building blocks of our faith that help us to get through those times of doubt, struggle and uncertainty.

**Theme Presenters:** Presbytery of WV Youth Council



## **Important Registration Information FOR YOUTH AND ADULTS**

This retreat is for youth in grades 6-8 and their adult advisors.  
There must be one adult for every 7 youth registered.

The retreat will begin with registration from 7:30-8:30 pm on Friday, March 2, and end with worship around noon on Sunday morning. The first meal served will be Saturday breakfast; the last meal will be Sunday breakfast.

The cost for each participant, youth or adult, is \$70. The name of the adult who will be responsible for youth on site is needed at the time of registration.

Registrations can be made online, by mail or by fax (304-744-7649); no phone registrations will be taken. The final deadline for registrations to be received in the Presbytery Office is **Thursday, February 15**. If you have questions about registering youth with special needs or potential conflicts, please contact Susan Sharp Campbell at 304-645-4568 prior to the 20<sup>th</sup>.

Cabin assignments are made as registrations are received. Late registrations will be accepted if there is room available; contact Susan.

## **ADULT ADVISORS - PLEASE NOTE**

Each adult planning to attend the retreat must return a **completed Volunteer and Information Form** and a **Release Authorization** no later than **Thursday, February 15**, or have completed and returned one in the last 12 months. Once registered, adults will be emailed the Presbytery's Child Protection Policy; these should be read prior to arrival. There will be an adult orientation on Friday evening at which time adult participants will be asked to sign that they have read this.

## **WHAT TO BRING - Each participant**

- ✓ A Bible
- ✓ Warm clothes
- ✓ Sleeping bag or twin bed sheets, and a pillow
- ✓ Towels and toiletries
- ✓ Flashlight
- ✓ Completed Covenant Form and Medical Release Form
- ✓ mission project supplies – see below

Please **DO NOT BRING** electronic items and/or valuable jewelry.  
We cannot be responsible for lost items.

## **EACH GROUP IS ALSO ASKED TO BRING SNACKS TO SHARE.**

### **Mission Project:**

Our Mission Project this year is Blessing Bags. **Each participant** is asked to bring the following (all of which needs to fit in a gallon bag):

- 1 travel size hand sanitizer
- 1 travel size hand lotion
- 1 travel pack of baby wipes
- 1 travel size sunscreen
- 1 individually wrapped toothbrush (no multi packets)
- 1 travel size toothpaste
- 1 pair of men's socks
- 1 tube of chapstick
- purse tissue packet

These will be shared with agencies that serve the homeless in our presbytery.

### **CELL PHONE POLICY**

Retreats are an opportunity to get away from the normal routines of life. Therefore, you are encouraged to leave your cell phone at home in order to facilitate building a new community in a limited amount of time. Cell phones shall not be used during scheduled activities (including but not limited to: keynote, small groups, recreation, meals, energizers, music and worship). This includes all cell phone use – calls, texts, games, listening to messages, etc. Misused cell phones are subject to confiscation.

**In the event of an emergency, Susan Sharp Campbell's phone is 304-667-9428.**

## Registration for 2018 Younger Youth Retreat, March 2-4, 2018

Church \_\_\_\_\_ Phone \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone and email of contact person \_\_\_\_\_

Name	Grade	M/F
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1	_____	_____
---	-------	-------

2	_____	_____
---	-------	-------

3	_____	_____
---	-------	-------

4	_____	_____
---	-------	-------

5	_____	_____
---	-------	-------

6	_____	_____
---	-------	-------

7	_____	_____
---	-------	-------

8	_____	_____
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Additional names may be placed on the back.

Responsible Adult(s) (you need 1 adult for each 1-7 youth.) If your group has both male and female youth, you are requested to have at least one male and one female adult. Emails are very important here!!!!

1	_____	email	_____
---	-------	-------	-------

2	_____	email	_____
---	-------	-------	-------

3	_____	email	_____
---	-------	-------	-------

4	_____	email	_____
---	-------	-------	-------

Mail this form with a registration fee of \$70 per person to:

Younger Youth Retreat  
Presbytery of West Virginia  
520 Second Avenue  
South Charleston WV 25303

REGISTRATION DEADLINE IS 2 PM, THURSDAY, FEBRUARY 15, 2018.

Please make check payable to Presbytery of West Virginia

**Volunteer Information Forms and Release Authorizations (included in information mailing) for all registered adults must be returned with registration form.**

Questions?

Susan Sharp Campbell, Associate for Educational Ministry, (304) 645-4568 or

[susan\\_sharp\\_campbell@hotmail.com](mailto:susan_sharp_campbell@hotmail.com)

9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_
16. \_\_\_\_\_
17. \_\_\_\_\_
18. \_\_\_\_\_
19. \_\_\_\_\_
20. \_\_\_\_\_

**Save the Date!!!!**

The Presbytery of West Virginia's Youth Council presents the:

**2018 Younger Youth Retreat**  
for grades 6-8

**Lego<sup>(T)</sup> Your Doubt:**  
*Building Blocks of Faith*



led by the

**YOUTH COUNCIL**

of

The Presbytery of WV

**Friday, March 2- Sunday, March 4, 2018**

**Cedar Lakes Conference Center**  
**Ripley, WV**



Focus: Even in the midst of our lives of faith, as children of God we all have times of doubt. Over the weekend, we will explore some of the building blocks of our faith that help us to get through those times of doubt, struggle and uncertainty.

**Registration deadline is Thursday, February 15, 2018.**

**Check with your youth leader, pastor or  
clerk of session after January 15  
for registration information!**



## **YOUTH**

### MEDICAL RELEASE FORM and INSURANCE INFORMATION

#### Youth Events – Presbytery of West Virginia

**To be signed by parent or guardian for each young person participating in the Presbytery of West Virginia YOUNGER YOUTH RETREAT, March 2-4, 2018. Please send it with your youth to the retreat.**

I give permission for my child, \_\_\_\_\_,  
to participate in the Younger Youth Retreat, March 2-4, 2018, at Bluestone Camp and Retreat Center. In case of emergency, I give my permission for medical treatment. Please reach me at one of the following telephone number:

Day \_\_\_\_\_ Night \_\_\_\_\_. In the event I cannot be reached in the case of an emergency, please contact: \_\_\_\_\_

who is \_\_\_\_\_ (relationship to youth)  
at phone number: day \_\_\_\_\_ night \_\_\_\_\_.

Signature of Parent \_\_\_\_\_

Print Name \_\_\_\_\_

Address: \_\_\_\_\_

**INSURANCE INFORMATION: This needs to be completed each time. Please do not assume the presbytery has this on file. This form will be shredded after the retreat.**

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Name of insured \_\_\_\_\_

Address: \_\_\_\_\_

Current Medications: \_\_\_\_\_

Allergies \_\_\_\_\_

Surgeries: \_\_\_\_\_

Special Needs, dietary or otherwise \_\_\_\_\_

Please circle if your child has a history with any of these medical problems:

Hay Fever

Convulsions

Lung Problems

Bee stings

Blood Pressure Problems

Ulcers

Fainting

Cancer

Kidney Problems

Asthma

Heart Disease

Diabetes

Sulfa Drug Allergic Reaction

Poison Ivy or Oak

Penicillin Allergic Reaction

Anything else the leaders of this retreat should know about your youth?

Name \_\_\_\_\_

**ADULTS**

**MEDICAL RELEASE FORM and INSURANCE INFORMATION**

**Youth Events – Presbytery of West Virginia**

**To be completed by each Adult participant at the Presbytery of West Virginia YOUNGER YOUTH RETREAT, MARCH 2-4, 2018. PLEASE BRING WITH YOU.**

**While we hope to never have to use this information, in the event that something happens such that you are unable to provide this, you are asked to complete the following.**

**INSURANCE INFORMATION: This needs to be completed each time. Please do not assume the presbytery has this on file anywhere. This will be shredded after the retreat.**

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Name of insured \_\_\_\_\_

Address: \_\_\_\_\_

Current Medications: \_\_\_\_\_

Allergies \_\_\_\_\_

Surgeries: \_\_\_\_\_

Special Dietary Needs \_\_\_\_\_

Please circle if you have a history with any of these medical problems:

Hay Fever

Convulsions

Lung Problems

Bee stings

Blood Pressure Problems

Ulcers

Fainting

Cancer

Kidney Problems

Asthma

Heart Disease

Diabetes

Sulfa Drug Allergic Reaction

Poison Ivy or Oak

Penicillin Allergic Reaction

Other Illnesses or Conditions: \_\_\_\_\_

In case of emergency, please contact \_\_\_\_\_ who is

\_\_\_\_\_ in relationship to me at phone number

Day \_\_\_\_\_ Night \_\_\_\_\_. In the event I am in

need of immediate medical care, I give permission for those in charge of the retreat to seek appropriate medical care for me, if I am unable to do so for myself.

**Covenant Form**  
**For All Participants**  
**Do Not Mail**  
**Bring to Retreat**

Name\_\_\_\_\_

Address\_\_\_\_\_

Age\_\_\_\_\_ School Grade\_\_\_\_\_ M\_\_\_\_ F\_\_\_\_\_

Church\_\_\_\_\_

I agree to abide by the following Retreat Covenant:

In coming to this retreat, it is important to remember that I am participating in a Presbytery-sponsored event, and am in a Christian setting. I promise to follow the Retreat Covenant and I will:

- ◆ Not bring or use tobacco;
- ◆ Not bring or use illegal drugs, alcohol, or weapons;
- ◆ Abide by the scheduled curfew;
- ◆ Follow the schedule, try to be prompt, and participate in all activities;
- ◆ Not visit a cabin assigned to the opposite sex;
- ◆ Respect the environment by caring for all buildings, putting trash and materials for recycling in proper containers, not wasting food, taking a brief shower, etc;
- ◆ See the designated person for medical care;
- ◆ Help clean my cabin on Sunday morning.
- ◆ Abide by the retreat cell phone policy (see below)

Signature\_\_\_\_\_

**Retreat Cell Phone Policy (developed by Youth Council)**

Retreats are an opportunity to get away from the normal routines of life. Therefore, you are encouraged to leave your cell phone at home in order to facilitate building a new community in a limited amount of time. Cell phones shall not be used during scheduled activities (including but not limited to: keynote, small groups, recreation, meals, energizers, music and worship). This includes all cell phone use – calls, texts, games, etc. Misused cell phones are subject to confiscation. Adult leaders at the retreat will have cell phones available for emergency calls. Bluestone's number in the event of an emergency is 304-466-0660.



## APPENDIX B

### Background Check Consent Form

***Applicant should complete all relevant information sign and date the form.***

Applicant's Full Name (Printed): \_\_\_\_\_

Other Names Used: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*NOTE: The above information is required for identification purposes only, and is in no manner used as qualifications for employment, internship, or service as a volunteer. Presbytery of West Virginia abides by all applicable state and federal employment laws.

#### **ADDRESSES (for the past 10 Years)**

Present Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

How Long at Present Address? \_\_\_\_\_

Former Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

How Long at Former Address? \_\_\_\_\_

Former Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

How Long at Former Address? \_\_\_\_\_

Please list all states and counties of residence since turning age 18: \_\_\_\_\_

\_\_\_\_\_

(Please circle any of the following states in which you have lived: CA, CO, DE, LA, MA, SD, VT, WV, WY)

#### **MOTOR VEHICLE RECORDS**

Names as it appears on License: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of License: \_\_\_\_\_

I, \_\_\_\_\_, hereby authorize Presbytery of West Virginia, and/or their agents to make an independent investigation of my background, references, character, past employment, education, credit history, adult criminal or police records, and motor vehicle records including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for service now and, if applicable, during the tenure of my employment or service with Presbytery of West Virginia.

I release Presbytery of West Virginia and their agents and any person or entity which provides information pursuant to this authorization from any and all liabilities, claims, or law suits in regards to the information obtained from any and all of the above referenced sources used. The name above is my true and complete legal name and all information provided above is true and correct to the best of my knowledge:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date