

BREAKAWAY

Senior High Youth Retreat for Students in Grades 9-12

Deepen relationships with friends from your church and get to know other students from all over WPA!



Pastor Lu
Speaker



Jelanie Pinnock
Worship

COST \$120

Things to do!
Breakout Sessions

Basketball

Soccer

Giant Swing

Zipline

Climbing Wall

Other Fun Activities

April 19-21, 2024

Beulah Beach Camp

6101 W Lake Rd

Vermilion, OH 44089

What to bring!

Bible, Pen, Notebook

Casual Clothing

Jacket or Hoodie

Sports Equipment

(optional)

Snacks & Goodies

\$\$\$ for extras

Towel & Washcloth

Toiletries

Pillow, Sheets

& Sleeping Bag

WPA District of the C&MA

341 Chestnut St, Punxsutawney, PA 15767

814-938-6920 • pizskerr@cmawpa.org

www.cmawpa.org

Students: Submit this registration form and your registration fee of \$120 or a \$20 deposit to your group leader by April ____ 2024. Leaders: Turn in your group's registration to the District Office by **April 8**.

Breakaway 2024 Registration/Emergency Medical Information

Bring a copy of this medical form for each student to Breakaway. Do not send this form to the District Office.

Student Name: _____ Phone Number: _____ Birthday: _____

Do you wear: Glasses or Contacts • Please list any medications, health problems, or allergies: _____

Name of Parent/Guardian: _____ Phone Number: _____

Health Insurance Provider: _____ Policy Number: _____

Family Doctor: _____ Phone Number: _____

I hereby consent to emergency medical treatment deemed necessary in the unlikely event of an accident during my child's involvement with the Breakaway Retreat. In the event that I cannot be reached in an emergency, I hereby give permission for any treatment deemed necessary by the licensed physician selected by the youth leader of my child's church. I also release The Christian & Missionary Alliance, Beulah Beach, and the Breakaway staff from liability resulting from any accident.

Parent/Legal Guardian (please print): _____ Date _____

Parent/Legal Guardian (please sign): _____ Date _____