Inviting all 6th, 7th and 8th graders for a great weekend at the...

Jr. High Retreat

February 11th – 13th at Camp Blue Diamond

Join us along with out new Program Director, Gabe Imler for the Jr. High Retreat. This is a great opportunity to spend time at camp in the winter. We will communicate exact Covid plans but precautions will be in place.

Cost \$70

Special Discounts

Pay only \$65 if you register by Jan. 31st

Who: All 6th, 7th and 8th Graders

When: February 11th - 13th; 7 pm Fri - 1:30 pm Sun.

Where: Camp Blue Diamond

Carrier address/phone: _____

What to bring: Sleeping Bag & Pillow, Bible, Face Mask, Flashlight and Warm Clothing for Playing Outside



Please complete the form below, and send it, along with payment to:

| Make checks payable to: Camp Blue Dian | lue Diamond, PO Box 240, Petersburg, mond Questions: call (814) 667-233 | 55 or email: campblue | |
|---|---|---|------------------------------------|
| _ | ration discount, mail must be post | | - |
| Name | Phone | | |
| Street | City | | Zip |
| Congregation | Grade | Sex: M F | Jr. High Retreat |
| Parent/Guardian: I give my child permission the leaders to act in any emergency and give put become necessary for my child to return hor transportation. Also, I give permission to use | permission to the physician selected to hose the for any reason prior to closing, I will a | spitalize or secure trea abide by the decision a | tment as needed. Should nd provide |
| Signed | Date Parent's E-r | nail | |
| Allergies: list all known (include medicati | ions. foods. and environment) | | |

Allergies: list all known (include medications, foods, and environment)

List medications being brought to camp: (be sure to bring them in original bottles with instructions)

Is the participant covered by family medical/hospital insurance? Y N

Insurance carrier or plan name: _______ Group #: ______