

Registration Deadline
and payment of \$25.00
is due by: Friday,
January 4, 2018

SURGE WINTER 2018

@ FBC MOUNT VERNON

Friday Evening, January 12, & Saturday, January 13
With a final group worship at 4:00 pm on Sunday the 14th
For all youth in 6th through 12th grade

Total fee of **\$25.00** includes 3 meals (Friday supper, Saturday breakfast and lunch), Snacks, a T-shirt, and learning materials. Participants will return to their homes to sleep.

Name: _____ Age: _____ Sex: _____ T-Shirt Size (adult sizes only): _____

Current School Grade: _____ E-Mail address: _____

Address: _____
(Street or P.O. Box) (City) (State) (Zip)

Parent/Guardian Name(s): _____ Home Phone: _____

Work Phone(s): _____ Cell Phone(s) (optional): _____

Additional Contact Person for Emergencies:

Name: _____ Phone Numbers: _____
(Home) (Work) (Cell)

Please list any allergies/medications or other medical conditions: _____

Name of Insurance Company covering camper: _____

Policy Number: _____ Name of Policy Holder: _____

Church you attend: _____ Member: Yes _____ No _____

As a participant I agree to abide by all the rules set forth by the DBA SURGE committee. I further understand that failure on my part to comply with rules and directions given by the event organizers and youth leaders that are serving as counselors and chaperones of the event will merit my immediate dismissal at my parent/guardian's expense.

Participants Signature: _____ Date: _____

Please Note: A Parent/Guardian Signature Is Required

As a parent/guardian I agree to allow my child to attend Winter Surge. I understand that the event organizers, the DBA, individual DBA churches or FBC Mt. Vernon, will not be held liable for injuries incurred as a result of my child's attendance at this event. Should injury or illness, other than minor, arise, I give my permission for medical care to be provided. I shall be fully responsible for payment of such cost. I also give my permission for any photographs taken of my child to be used for possible promotion purposes. I also give my permission for my child to be transported from FBC Mt. Vernon to participate in a local mission project.

Parent/Guardian Signature: _____ Date: _____

Schedule:

Friday, January 12 arrive for supper & activities @ 6:00 pm

Depart for home @ 10:00 pm

Saturday, January 13 arrive for breakfast and a full day of activities @ 9:00 am.

Depart for home @ 4:00 p.m.

Sunday, January 14, Final Worship Together @ 4:00 p.m.

Return application and deposit to:

Daniell Baptist Association

P.O. Box 388

Ailey, GA 30410

Make checks payable to Daniell Baptist Association

If you have any questions please call:

Laura Hay at 253-0041 or Tabitha Braddy at 253-2896

Registration Due by Friday, January 4, 2018