

Registration Deadline  
and payment of \$25.00  
is due by:  
February 19, 2020

# SURGE WINTER 2021

## @ FBC MOUNT VERNON

**Saturday, February 27 – 10:00 AM to 4:30 PM**  
For all youth in 6<sup>th</sup> through 12<sup>th</sup> grade

Total fee of **\$25.00** includes Saturday lunch, Snacks, a T-shirt, and learning materials

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: \_\_\_\_\_

Cell Phone(s): \_\_\_\_\_

Additional Contact Person for Emergencies:

Name: \_\_\_\_\_ Phone Numbers: \_\_\_\_\_  
(Home) (Cell)

Please list any allergies/medications or other medical conditions: \_\_\_\_\_

Name of Insurance Company covering student: \_\_\_\_\_

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:**

Saturday, February 27

|                    |          |
|--------------------|----------|
| Check -in          | 10:00 am |
| Fun & Worship      | 10:30 am |
| Lunch              | 12:30 pm |
| Mission Activities | 1:15 pm  |
| Worship & Wrap-up  | 3:30 pm  |
| Depart for home    | 4:30 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

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