

Will You Experience It?

The mysterious van ride north on Route 15 to Pennsylvania, dinner at Arby's, the gradual climb into the Pocono mountains. You pull into the snowy road, where you are greeted by 150 other students, warm cabins, lots of snow, a rockin' house worship band, a great speaker, a game room, the tubing hill to beat all tubing hills, hockey, ice skating, sledding, snow football, the manly-man run, and a whole bunch of other stuff you love. It is winter. It is a blast. It is...

Camp Orchard Hill's - Middle School WINTER BLAST

March 5-7, 2010

Camp Orchard Hill ("COH" - www.camporchardhill.com) is an Evangelical Free Church camp located near Scranton, PA. It takes 3 1/2 hours to get there, but it's worth it. COH has a great program with lots of outdoor activities and outstanding music and speakers.

What does it cost?

\$120 (scholarships available)

How do I register?

Turn in the attached form to Pastor Steve with a \$65 deposit by January 13th.

Balance is due Feb 17th.

SPACE IS LIMITED. REGISTER EARLY!

As always, please leave all electronic devices (except cameras) at home. This includes cell phones, PSPs, IPODs, etc.

Students may borrow youth leaders' phones to report arrival time.

PARENTS, please help us enforce this!

What do I Bring?

- Sleeping bag & Pillow
- Bible
- Lots of Warm Clothes
- Gym Cloths & Sneakers
- \$ for 2 fast food meals while traveling
- \$ for snack bar

Where/When do we meet:

Leaving at 4:00 p.m. from Urbana High on Friday, March 5th.

Returning to Urbana High around 4:30 p.m. on Sunday, March 7th

Emergency Info for parents:

Steve's Cell (301) 788-6109

Camp Orchard Hill (570) 333-4098

Snow is much more than frozen water. It is frozen water with **POTENTIAL!**
- Frosty

WINTER BLAST 2010

Student Information

Complete and give this form, with a \$65 deposit, to Pastor Steve by January 13th. Balance due February 17th.

Name _____ Grade _____ School _____

Address _____ City _____ State _____ Zip _____

Phone (____) _____ Parent Email _____

If you are a guest, who brought you? _____

Emergency Contacts

Primary Contact Person: _____ Relationship: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Alternate Contact Person: _____ Relationship: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Health Info and Parental Permission:

List any health disorders or surgeries:

List any allergies:

List any current medications (including dosage and times):

This health history is correct as far as I know, and the camper/worker listed has permission to engage in all prescribed camp activities including travel to and from Camp Orchard Hill for off-site activities, except as noted by me. **I give permission for the group leader that takes my child to Winter Blast at Camp Orchard Hill to provide ongoing health care and to select local medical personnel to order tests and treatment as needed for the camper listed.**

In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the group leader to hospitalize, secure proper treatment for, and to order injection and/or anesthesia and/or surgery for the person listed.

Signature of Parent/guardian: _____ Date: _____

Policy Holder's Name: _____ Policy #: _____

Insurance Company: _____

Insurance Company Address: _____



SNOWTUBING RELEASE AND WAIVER AGREEMENT

Date: _____ Email Address: _____

Name: _____ Date of Birth: _____

Address: _____ Phone: _____
City State Zip

Name of group/special event/contest (if applicable): _____

INFORMATION REGARDING MINORS

<i>Please Print</i>	Last Name	First Name	Birth Date
Minor #1			
Minor #2			
Minor #3			
Minor #4			

Seven Springs Farm, Inc. d/b/a Seven Springs Mountain Resort, its owners, officers, employees, agents, representatives, parents, and affiliates (hereinafter, "Seven Springs") has agreed to permit me to use the snow tubing facilities. In consideration for Seven Springs' permission, **I agree:**

- (1) that I understand that snow tubing is potentially hazardous and may result in serious injury or death. I understand that there are inherent and other risks involved in snow tubing. Some of these risks include, but are not limited to, the use of lifts and snow tubes, variations in snow, steepness and terrain, ice and icy conditions, moguls, rocks, trees, and other forms of forest growth or debris (above and below the surface), bare spots, lift terminals, cables, utility lines, snowmaking equipment and component parts, and other forms of natural or man made obstacles on and /or off chutes, as well as collisions with equipment, obstacles or other snow tubers. Snow chute conditions vary constantly because of weather changes and snow tubing use. Snowmaking and snow grooming may be in progress at any time. The negligence of other snow tubers, or of Seven Springs, may create risks.
- (2) to accept all risks of snow tubing, whether specifically listed in paragraph (1) above or not.
- (3) to follow all rules, instructions, and directions provided by Seven Springs. If I do not, my ticket may be revoked, with no refund of the amount paid by me.
- (4) to waive my right to bring any claims against Seven Springs that arise out of or relate to my snow tubing, and to release Seven Springs from liability for any such claims. This waiver and release includes claims based upon negligence by Seven Springs. I further agree that I will indemnify, hold harmless, and reimburse Seven Springs for all losses (including attorneys' fees and costs) from any claims brought by any persons or entities arising out of or relating to my snow tubing.
- (5) that all disputes arising under this Release or from my use of the tubing facilities at Seven Springs shall be litigated exclusively in the Court of Common Pleas of Somerset County, Pennsylvania.
- (6) I grant Seven Springs permission to use photographic and/or video images of me for the purpose of marketing, publicizing and promoting the resort. I waive any right to be compensated for the use of my image and release Seven Springs from liability for any claims, where such claims arise out of or relate to Seven Springs' use of my image.

Adults: I understand this Agreement and enter into it voluntarily.

NAME: _____ DATE: _____
(signature adult snow tuber)

Parents, guardians, or responsible adults: I agree: (1) that I have discussed this Agreement with the minor(s); (2) that paragraphs four and five above apply to any claim by me related to the minor's participation; and, (3) to indemnify and hold Seven Springs harmless for all losses (including attorneys' fees and costs) from any claims by or on behalf of the minor(s) related to the minor's participation.

NAME: _____ DATE: _____
(signature parent, guardian, or responsible adult)

EMERGENCY PHONE NUMBER: _____