

## PARENT'S INFORMATION SHEET

**EVENT:** 2018 TEEN WINTER RETREAT

**DATE:** February 2 – 4<sup>th</sup>, 2018

**TIME:** Depart Falmouth Baptist Church @ 3:00 p.m. (Fri., Feb 2) – Return @ 5:00 p.m. (Sun., Feb 4)

**PLACE:** Monadnock Christian Ministries (formerly Monadnock Bible Conference), Jaffrey, New Hampshire

**DESCRIPTION:** We will depart Falmouth Baptist Church @ 3:00 p.m. on Feb 2nd for Monadnock via caravan—all adult drivers will stay together on the road and are covered by our church vehicle insurance. During our visit at Monadnock we will have three sessions of Bible study/speaker(s) as well as three worship sessions. The speaker for our weekend is Chris Allen and our worship band is Road to Damascus.

Some activities cost extra—for example paintball; Monadnock's Snack Shack; and the Camp Store

**WHAT TO BRING:** Items on the What To Bring list  
Permission Slip—*no slip, no trip*  
2018 Winter Retreat Covenant  
Payment (\$155)—checks written to Falmouth Baptist Church  
\$\$ money for food/drinks on the road (Friday & Sunday)  
Your Encounter Medical Form (this too is a show stopper—a must-have item)  
\$\$ if you plan to spend extra at Monadnock (camp store, snack shack or paintball)

**DEPARTURE:** Friday, February 2<sup>nd</sup> @ 3 p.m. from Falmouth Baptist Church—**please be here by 2:45 p.m.**

**RETURN/PICK-UP:** Sunday, February 4<sup>th</sup> @ approx. 5:00 p.m., at Falmouth Baptist Church—the youth will begin calling via cell phones as we approach the Bourne Bridge.

**\* NOTE: Transportation from the church to home is NOT available—youth MUST be picked up @ the church**

**CHAPERONE MOBILE PHONE NUMBER:**  
TIM ROGERS (508)274-9645

\*additional chaperone names & phone numbers may be provided upon request

FYI: Cell Phone coverage in Jaffrey, New Hampshire may not be available at some locations

**FOR MORE INFORMATION** contact Tim Rogers at (508)548-3260 or log onto  
[www.falmouthbaptist.com](http://www.falmouthbaptist.com) or [www.monadnockchristianministries.org](http://www.monadnockchristianministries.org)

**Monadnock Christian Ministries**  
PO Box 70  
257 Dublin Road, Jaffrey, NH 03452  
Phone: (603) 532-8321  
Fax: (603) 532-4277

## 2018 WINTER RETREAT WHAT TO BRING LIST

### Essentials

1. Bible
2. Notebook
3. Pen/Pencil & Highlighter
4. Personal Hygiene Items; deodorant, zit cream, more deodorant, hair stuff, more deodorant, toothbrush, toothpaste, more deodorant, mouth wash, dental floss, more deodorant, soap, shampoo, conditioner, flip flops/shower shoes, & more deodorant
5. Teddy bear and/or “blankie”
6. Attire; winter sports clothes, long-sleeved shirts, sweatshirts, pajamas, extra socks, warm/dry foot gear, gloves, scarf, hat, etc.
7. Indoor Clothes; shorts, t-shirt, sneakers—ga ga and pickleball attire...
8. Swimsuit—modest, one-piece swimsuit
9. Sleeping bag (or sheets & blanket) and a pillow—**no bedding (only beds) are provided**
10. Towel, washcloth, swim towel...
11. FBC Permission Slip—no slip, no trip...
12. FBC Covenant
13. Encounter Medical Form / Permission & Release —no waiver, no way...
14. Paintball Permission Form (bring one just in case—you don’t have to play with one, but you can’t play without one...)
15. Payment: \$155 (includes transportation, meals, & lodging)

### Extras:

1. Camera & Film/Batteries
2. Spending \$\$\$\$--we **will** stop for food on the way to & from Monadnock
3. \$\$\$\$ for Monadnock’s snack shack (optional)
4. Pepperidge Farms Lexington Milk Chocolate Toffee Almond cookies for Pastor Tim

### WHAT **NOT** TO BRING:

Library card, tobacco, drugs, alcohol, weapons, go cart, pocket knives, shivs, lighters, live reptiles, skis, video or audio devices, Dad’s car keys, snowboards, hand-held electronic games/computers/devices (such as iPods, sleds or snow tubes, cell phones, radios, MP3 players, 2-way radios, CD players, Gameboys, Nintendo DS, etc.), Mom’s checkbook, vape anything, immodest clothing, attire with offensive language/symbols, Aunt Edna’s fruitcake, lock-picking tools, and nuclear-powered ANYTHING, and your water buffalo

# PARENTAL PERMISSION & EMERGENCY MEDICAL TREATMENT SLIP

Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

E-mail \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship to child \_\_\_\_\_

Emergency Contact Phone Number \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_

Special Medications \_\_\_\_\_

Allergies \_\_\_\_\_

Medical Handicaps/Disorders/Diseases/Restrictions \_\_\_\_\_

Date of last Tetanus Booster \_\_\_\_\_ (should be up to date)

Health Insurance Company & Address \_\_\_\_\_

Policy Number \_\_\_\_\_ Group Number \_\_\_\_\_

In case of medical emergency, I hereby give permission to the physician selected by the chaperone(s) in charge to hospitalize, secure proper treatment for, and to authorize transportation, anesthesia or surgery for my child, as named on this form. I certify that the child is in good physical condition and is able to participate in the entire program other than any activities listed as restricted above.

I give Falmouth Baptist Church permission for my child to take part in the **2018 Teen Winter Retreat (ENCOUNTER), at Monadnock Christian Ministries, in Jaffrey, NH** departing Falmouth, MA on **Friday, February 4, 2018 at 3:00 p.m.** and returning **at approximately 5:00 p.m., Sunday, February 4, 2018.** I further agree to hold Falmouth Baptist Church and its agents harmless and to indemnify them against all losses, liability, claims, or expenses including fines, penalties, and attorney's fees due to any alleged injury to my child incurred in connection with the operation of the trip and transportation thereto and therefrom. I also assume the responsibility of any damages caused or expenses incurred by my child.

I grant to Falmouth Baptist Church, its representatives and employees the right to take photographs, video and/or audio recordings of my child(ren) and my property in connection with the above-identified subject. I authorize Falmouth Baptist Church, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Falmouth Baptist Church may use such photographs for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content. I understand that no other personal information such as my child's name or other personal identifier will be used and my child's photograph, video, or audio recording will be removed from any form of media immediately upon request. Falmouth Baptist Church values the opportunity to feature our church family in various media/publications; however we respect that some parents may not wish to have themselves or their child appear in any church-related publication. We will honor your instructions when planning our publications.

I further give permission for the chaperone(s) to send my child home via bus, taxi or public transportation at my expense if he/she is determined by the chaperone(s) to have disobeyed instructions, or participated in any illegal, immoral, or improper conduct. The decision to transport a child home will be solely at the discretion of the chaperone(s). All expenses will be borne by the undersigned legal parent or guardian.

Signature of Parent of Legal Guardian \_\_\_\_\_

Printed name of above signed individual \_\_\_\_\_

# COVENANT FOR 2018 TEEN WINTER RETREAT

## I AGREE TO:

- PARTICIPATE FULLY IN ALL WORSHIP, BIBLE STUDY AND DEVOTION TIMES AND HAVE MY OWN “GOD TIME” DAILY
- USE THE SAME-SEX BUDDY SYSTEM AT ALL TIMES
- COMPLY WITH THE REQUESTS OF THE ADULT CHAPERONES
- CLEAN UP AFTER MYSELF (VEHICLES, ROOMS, COMMON AREAS, ETC.)
- LISTEN ONLY TO CHRISTIAN MUSIC
- FOLLOW OUR DRESS CODE:
  - NO EXPOSED BELLY BUTTONS
  - NO EXPOSED CLEAVAGE
  - NO EXPOSED UNDERWEAR
  - T-SHIRT MESSAGES MUST BE POSITIVE
  - EVERYONE MUST WEAR SHIRTS
  - SWIMSUITS MUST BE MODEST (ONE-PIECE)
- STAY WITHIN MONADNOCK’S GROUNDS AT ALL TIMES
- FOLLOW THE RULES OF THE GROUP CHAPERONES & MONADNOCK’S STAFF AT ALL TIMES
- CONSIDER THE SAFETY OF YOURSELF AND OTHERS AT ALL TIMES
- RESPECT MYSELF, MY PEERS AND ADULTS
- RESPECT STUFF THAT BELONGS TO OTHERS
- RESPECT THE NEED FOR OTHERS TO HAVE SPACE/TIME ALONE
- REFRAIN FROM PUBLIC DISPLAYS OF AFFECTION—HAND HOLDING IS THE LIMIT
- REFRAIN FROM ENTERING THE SLEEPING QUARTERS OF ANYONE OF THE OPPOSITE SEX (NO BOYS IN GIRLS ROOMS & VICE VERSA)
- REFRAIN FROM USING “SWEAR” LANGUAGE
- REFRAIN FROM ASKING OTHERS (ESP. CHAPERONES) FOR MONEY
- REFRAIN FROM USING TOBACCO, DRUGS OR ALCOHOL
- REFRAIN FROM ANY ILLEGAL, IMMORAL, OR IMPROPER BEHAVIOR

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(STUDENT’S SIGNATURE)

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(DATE)

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(STUDENT’S E-MAIL ADDRESS)

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(STUDENT’S MOBILE PHONE)



## Encounter Medical Form

Guest/Staff/Volunteer Name: \_\_\_\_\_

(First, Middle Initial, Last)

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_ Male      \_\_\_ Female

Monadnock Bible Conference will call if there is/are question(s) regarding your child's health and/or if there's an emergency. Please provide contact information for a custodial parent/legal guardian who will be available via phone while your child is at Monadnock Bible Conference. **Staff, volunteers and leaders will provide an emergency contact. One Medical Form per person!**

Parent/Legal Guardian/Emergency Contact Name: \_\_\_\_\_

Primary Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Alternate Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Parent/Legal Guardian/Emergency Contact Home Address: \_\_\_\_\_

(Street Address, City/Town, State, Zip Code)

About Health Care for Encounter/Weekend Retreat Attendees:

1. At Minimum a Staff Member/Volunteer will be EMT Certified and/or First Aid/CPR/AED Certified when attendees are at weekend retreats at Monadnock Bible Conference.
2. Monadnock Bible Conference has a Health Center stocked with non-prescription medications to manage/treat injuries and/or illnesses.

**List of non-prescription medications available in the Camp Health Center:**

**-Please clearly cross out medication(s) the attendee should NOT be given-**

- Acetaminophen (Tylenol)
- Pseudoephedrine (Sudafed)
- Antibiotic Cream (topical)
- Calamine Lotion (topical)
- Diphenhydramine-Antihistamine/Allergy Medicine (Benadryl)
- Epinephrine (Epi-Pen for severe allergic reactions)
- Hydrocortisone Cream
- Lice Shampoo (Nix, Elimite and/or Mayonnaise)
- Saline Eye Drops (Visine/Clear Eyes)
- Aloe
- Antifungal Spray/Powder
- Cough Syrup/Cough Drops
- Ibuprofen
- Electrolyte Drinks/Powders (Gatorade/Powerade)

**PLEASE TURN TO THE OTHER SIDE**



# Encounter Medical Form

Date of the Attendees Last Tetanus Shot: \_\_\_\_/\_\_\_\_/\_\_\_\_

-Any known medical limitations/conditions (including allergies):

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-Please list all medications (prescription, non-prescription and vitamins) and why they're used:

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### \*Insurance Information\*

Subscribers Full Name: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Insurance ID: \_\_\_\_\_

Insurance Co. Phone Number: \_\_\_\_\_

### PERMISSION STATEMENT:

*"I understand and certify that my child's participation in Monadnock Bible Conference's Encounter/Weekend Retreat Program is completely voluntary, and I have familiarized myself with the program and activities my child will be participating in. I recognize certain hazards and dangers are inherent in the Encounter/Weekend Retreat Program and particularly, but not limited to: snow tubing, activities in the snow, tournaments, hatchet throwing, archery, paintball, riflery, pillow polo, gaga, volleyball, basketball, swimming (indoor heated pool), zip lining, low and high ropes course, wall climbing, group games and other activities. I acknowledge that although Monadnock Bible Conference has taken safety measures to minimize risk, Monadnock Bible Conference cannot guarantee the participants, equipment, facilities, premises, and/or activities will be free of hazards, accidents and/or injury. I further recognize and have instructed my child in the importance of knowing and abiding by all camp rules, policies and procedures for the safety of every guest, volunteer and staff member."*

*"I hereby give permission to the physician(s) and/or hospital/medical center selected by the Camp Directors to hospitalize and/or medically treat my child as deemed necessary. This may include: laboratory work, radiological procedures, immunization(s), prescribing medication(s) and other procedures necessary for medical treatment, including surgery"*

*"In registering my child for any event at Monadnock Bible Conference, I grant permission to Monadnock Bible Conference and any of its ministries to use my child's name, image, voice and/or image for promotional reasons."*

**Signature of Parent/Legal Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

# **MCCCI Paintball Field Safety Rules and Permission Form**

**(for Encounter Weekends)**

**This is a Release of Liability. Read before signing.** The participant will not be allowed to play on the Monadnock Paintball Field until this form is read, agreed upon, appreciated and signed.

**YOU MUST BE 12 YEARS OLD (or older) TO PLAY PAINTBALL!!!**

**In consideration of being permitted to participate in any way in the sport and activities of paintball, I acknowledge, appreciate, and agree that:**

1. I understand the risk of injury from the activity and weaponry involved in paintball is significant, including the potential for permanent disability and death, and while particular protective equipment and personal discipline will minimize this risk, the risk does still exist.
2. I knowingly and accept freely such risks, both known and unknown, even if arising from negligence of those persons released from liability below, and assume full responsibility for my participation.
3. I understand the activities of paintball are physically and mentally intense. I understand the rules of play and will comply with all rules and regulations. If I observe any unusual or unnecessary hazard during my participation, I will bring such to the attention of the nearest Field Referee and/or Camp Staff Person as soon as practical.
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release Monadnock Christian Conference Center Inc. of New Hampshire, the owners and lessors of premises used to conduct the paintball activities, their officers, officials, agents and/or employees (Releasees), with respect to any and all injury, disability or death; loss or damage to person or property, whether caused by the negligence of the releasees or otherwise, except that which is the result of gross negligence and/or wanton misconduct.
5. I understand and agree this Release of Liability Agreement covers each and every paintball activity and event in which I participate hereafter.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

**\*\*Please Print Legibly\*\*      \*\*Please Print Legibly\*\***

- Church Group Name: \_\_\_\_\_
- Leader's Name: \_\_\_\_\_
- Participant's Name: \_\_\_\_\_
- Date(s) or Participation: \_\_\_\_\_
- Participants Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

**\*Participant's Signature:** \_\_\_\_\_

**\*If Under 18 years of age. A Parent/Legal Guardian must read and sign below.**

**Participants under the age of 18 of at the time of registration.**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree not only to his/her release of Monadnock Christian Conference Center Inc. and all other Releasees but also to release and indemnify the Releasees from any and all liabilities incident to his/her involvement in these programs for myself, my heirs, assigns, and next of kin. The undersigned parent or legal guardian hereby gives permission for Monadnock Christian Conference Center Inc. of New Hampshire to authorize emergency medical treatment as may be deemed necessary for the child named above, while playing paintball games at Monadnock Christian Conference Center Inc. of New Hampshire from this date through year end.

**\*Signature of Parent/Legal Guardian:** \_\_\_\_\_

**\*Date of Signature:** \_\_\_\_\_

**\*Emergency Phone Number:** \_\_\_\_\_



## **Safety Rules, Procedures, and Regulations**

1. All players **MUST** have a release form signed and on file in our office. No one may play without one.
2. All players **MUST** be **AT LEAST** 12 years old to play paintball.
3. All players **MUST** wear a mask that provides full facial, eye and ear protection.
4. All players will go through an orientation and demonstration by a trained Monadnock Staff member **BEFORE** gameplay.
5. There will, at all times, be **AT LEAST** two trained Paintball Referees present during paintball operations.
6. The Field Referee(s) will have the final say in all disputes, and can dismiss player(s) with or without cause. The Field Referee(s) have the **FINAL** word.
7. All players **MUST** listen to the Field Referee.
8. When not in gameplay, all players must hold their markers with barrels facing the ground, uncocked, safety engaged and barrel bag placed over the end of the barrel.
9. All players must use paintballs provided by Monadnock Bible Conference. Players **MAY NOT** use their own paint.
10. Players may bring their own markers/tanks however, they **MUST** be turned in at the office, and Monadnock Staff will be responsible for their storage. Monadnock Staff will also ensure every "foreign marker" will be held in compliance with the Monadnock Paintball Field Safety Rules, Procedures, and Regulations.
11. All markers will be set to 260fps.
12. No one may tamper with the Paintball Markers/Tanks. Only Monadnock Staff may adjust Paintball Markers/Tanks.
13. All markers will be HPA (high pressured air) capable. No CO2 markers will be allowed on the paintball field.
14. All paintball activities will be held in Monadnock-approved field(s).

15. All paintball games are \$10.00 per/person, per/game whether using Monadnock Paintball Equipment or your own. Each game runs 1 hour.
16. All players MUST wear proper footwear during gameplay.
17. All players should wear clothing suitable for the environment they'll be playing in. I.E: if it's winter; wear warm clothes. Players should wear clothes they don't mind getting dirty. Paintball paint washes out of MOST clothing.
18. No climbing trees, rocks or other obstacles.
19. All gameplay must be done strictly within the boundaries and parameters of all Paintball Field(s).
20. Tippmann Sports LLC will bi-annually inspect all paintball markers and HPA tanks.
21. All markers, tanks, barrel bags and masks will be cleaned and sanitized on a daily basis.
22. No physical contact is allowed on the paintball field(s).
23. If a player yells "I surrender" during gameplay, no one may shoot said player.
24. When a player is hit (or yells "I surrender"), they must hold their marker above their head, yell "out!", and walk off the field.
25. Field Referee(s) dictate gameplay. All players MUST listen to Field Referee(s). NO EXCEPTIONS.