

FALL YOUTH RETREAT 2007

WHO: YOU AND ALL YRUU MEMBERS.

WHY: FOR FUN!!!

WHAT: FALL RETREAT. NATURE, FRIENDSHIP, FIRES OUTSIDE, WALKS IN THE WOODS, COZY BARN, & GOOD FOOD.

WHERE: NEW PLACE! FARM AND WILDERNESS in Plymouth, VT

WHEN: SEPTEMBER 21 - 23. DEPARTURE FRIDAY AT 6:00 PM FROM FIRST PARISH. RETURN TO THE CHURCH BY 4:00 - 4:30 PM SUNDAY. YOUTH WILL CALL PARENTS UPON RETURN.

HOW:

1. FILL OUT RETREAT REGISTRATION FORM (included)
2. FILL OUT THE F&W RELEASE FORM (included)
3. ATTACH A CHECK for \$100, MADE OUT TO "FIRST PARISH"

And if you haven't already filled out these forms for YRUU this year you **MUST** have these in to go on the retreat:

4. EMERGENCY HEALTH FORM (download from F.P. website)
5. STUDENT CODE OF CONDUCT FORM (download)
6. SEND EVERYTHING BY Wednesday, SEPTEMBER 13 TO:
MARY-WREN VANDERWILDEN
FIRST PARISH IN CONCORD
20 LEXINGTON ROAD, CONCORD, MA 01742;

COST: \$100 PER PERSON.

INFORMATION:

- Upon arrival, we will walk about a mile from the main road. Plan to hike in with all your own stuff in your backpack. If you are unable to walk, please let Mary-Wren know, and we can arrange transit, no problem.
- Please bring a warm sleeping bag, sleeping pad, outdoor clothes, boots and extra clothes, socks, etc. Be prepared for rain and temperatures as low as freezing at night. Hat and gloves are nice to have.
- Pack only one bag so you can carry your stuff; this includes your sleeping bag and pad, etc. If you don't have a big back-pack, try to borrow one.
- **Bring bag dinner for Friday night.** All other food will be provided and we will split up into teams for the cooking and cleaning.
- An informal service will be created by the youth for Sunday morning. **Everyone, please bring readings or books that you would like to share.**
- **ANY QUESTIONS? CALL MARY-WREN @ 369-9602 ext. 427**

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Release Form

I, _____, give permission for my child, _____, grade _____,

to attend the First Parish, Concord Youth Group, Fall Youth retreat in Corinth, Vermont.

Method of transportation: Bus & personal vehicle driven by chaperones. Send this form and your check before **September 13!!**

I further give permission to chaperones to authorize emergency medical treatment if deemed necessary.

Should my child have any special needs that may impact his/her safety or well being during this retreat, it is my responsibility to notify the Youth Director, Mary-Wren vanderWilden (369-9602 ext:427) a minimum of one week before the retreat.

This provision has been added to the permission form to ensure your child's safety. It is important that the Youth Director know, for example, if your child has severe food allergies and needs to carry an epi-pen, has diabetes, takes medication for attention deficit disorder or depression that may lose its effectiveness during the retreat, or has any other need that you feel may be of concern. If your child needs to be administered medication during the retreat, you must contact the Youth Director who will work with you to determine a plan that will enable the chaperones to best meet the needs of your child during the retreat. All information provided will be confidential.

Who To Call In An Emergency

Name: _____

Tel.No. 1: _____

Tel. No. 2: _____

Back-Up

Name: _____

Tel. No. 1: _____

Tel. No. 2: _____

Signed _____ **Date:** _____ **Phone Day:** _____

Name (print) _____ **Phone Evening:** _____

Relationship to child: _____

Acknowledgement of Risks and Release of Claims
Farm & Wilderness Foundation

The safety and well being of each participant is of paramount importance to staff of Farm & Wilderness Foundation. All reasonable care and precautions are taken to ensure a fun and creative community-building experience takes place. The following acknowledgment and release form is both a requirement of our insurance coverage and an important reminder to you as a parent, chaperone or participant to be sure you and the children are properly prepared.

I agree to abide by the following guidelines during my stay at Farm & Wilderness:

1. No tobacco, drugs, alcohol, or firearms allowed.
2. No open flame inside any of the buildings.
3. Quiet hours begin at 10pm and end at 7:30am.
4. I will participate in the community tasks associated with this event including meal preparation and cleanup.
5. I will leave my pets at home.
6. I agree to abide by the waterfront rules.

I understand that this event takes place in rocky, mountainous and forested terrain on and around Farm & Wilderness lands and that waterfront activities may be a part of the experience. The following potentially hazardous activities, as well as others not mentioned, may be undertaken: rustic living, hiking, swimming, canoeing, rock climbing, cooking, and doing barn chores. These activities can cause personal injury, property damage, illness or death. I realize that Farm & Wilderness does not provide childcare or adult supervision for children under the age of 18. Childcare and adult supervision is the responsibility of the parents and chaperones.

In recognition of the potential hazards, I, or my children, my heirs and assigned, do hereby release Farm & Wilderness and its employees from any and all liability, actions, causes of action, debts, claims and demands of every kind and nature whatsoever, and specifically including any claim for negligence or negligent acts, arising from my participation in Family Camp. I further agree to hold harmless and indemnify F&W and its agents for all defense costs, including my attorney's fees and any other costs resulting in connection with my participation.

Please have every person over 12 years old read and sign this acknowledgement of risks and release of claims statement.

If the participant is under 18, please have parent/guardian print and sign their name.

Child's name _____

Child's signature _____ **Date** ____/____/____

Parent/ Guardian Name _____

Parent/ Guardian Signature (If student is under 18 years old) _____