

February 28 - March 1, @ Camp Joy ElPacking list and FAQ for the trip will be given to all who register.

For Grades 3-5. Cost is \$50. Registration form & \$25 deposit due January 26

Kid's Information:

Name:		Birthday:		
Gender:	Grade:			
Home Address:	City:	State:	Zip:	
Parent/Guardian Information	n:			
Name:				
Home Phone:	Cell Phone:			
Email:				
l,		give perm	nission for my child,	
Preteen Retreat February 28-N	March 1.	to participate in Ca		
I will not hold Carlisle UMC, or in an event of injury. Further, I gency medical treatment.	agree to accept any and al	l financial responsibilit	ry as a result of emer-	
Please list any special medical	information about your ch	ild including allergies:		
Parent/Guardian Signature:		Da	te:	