

Bring this Authorization to retreat

Camp Luz

### Shalom Youth Retreat Authorization

Participant \_\_\_\_\_

Prescription medications (that are brought to the retreat): \_\_\_\_\_

Allergies or unusual medical conditions: \_\_\_\_\_

\_\_\_\_\_ Last Tetanus \_\_\_\_\_

I give permission for my son/daughter (mentioned above) to attend the retreat at Camp Luz. I further grant permission for a licensed physician, chosen by the retreat director, to perform emergency medical treatment including X-rays, administer medications and perform emergency surgery. I will assume liability for any resulting expense which is not covered by camp insurance. I also give permission for photographs to be used in camp publicity and on its website.

Print Parent/Guardian Name: \_\_\_\_\_

Phone # \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Parents:** Camp insurance provides secondary coverage for accidents.

### What should I bring?

**Bring this!**

- November type casual clothing
- Warm jacket, gloves
- Dark clothes for *Persecution*
- Bedroll & pillow
- Personal items (towel, etc.)
- Bible, pen & the attached Authorization Form
- Optional: camera, flashlight, musical instrument

**Don't bring this!**

- July type casual clothing
- The noisemaking technological 'what did they ever do without?' electronic gadgets
- Fireworks
- Snacks — hey, we'll feed you good!

**Arrive:** Friday @ 7 pm **Depart:** Sunday @ 1:30 pm

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