



8/9th grade RETREAT
VINJE IMMERSION

CALLING ALL 8/9th graders this year for your confirmation retreat we are changing things up a little... Meet your group at church no later than 7pm Saturday, May 15 at Vinje. Cost is \$20 and includes late night snacks and breakfast. Please turn in your registration and money by Sunday, May 9th. If you are unable to attend please let Laura know to arrange your alternative to the retreat.

Items to bring: Sleeping Bag, pillow, toiletries, appropriate sleeping clothing, change of clothes for Sunday morning worship.

Name _____	Grade _____
Parent or Guardian _____	Phone _____
Alternate person to contact in case of emergency:	
Name _____	Phone _____
Name _____	Phone _____
Please list any medications or health concerns.	

The undersigned does hereby give permission for our (my) child, _____	
To participate in the 8/9th Retreat May 15 & 16 through Vinje Lutheran Church, Willmar, MN.	
We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any X-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital b care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.	
The undersigned shall be liable and agrees to pay all costs and expenses incurred in connections with such medical and dental services rendered to the aforementioned child pursuant to this authorization.	
Parent or Guardian _____	Date _____
Insurance Information _____	