

REGISTRATION FORM FOR DAUGHTER RETREAT

NAME: _____

BETHEL # _____ OFFICE IN BETHEL: _____

ARE YOU A PHQ? ___ YES ___ NO

ADDRESS: _____

CITY, ZIP & PHONE: _____

EMAIL ADDRESS WHERE WE MAY CONTACT YOU: _____

I _____ agree to abide by the rules and regulations set forth by JDI and the GGC of Maryland. I further cheerfully agree to participate in all planned activities of the weekend unless prevented by a medical condition as indicated on the attached medical info form. Failure to abide by these rules may result in my removal from the activities and my parents/guardians be called to take me home.

I FURTHER UNDERSTAND THAT I AM AWARE OF THE GGC OF MARYLAND TRANSPORTATION AND ACCOMMODATIONS GUIDELINES AND AGREE TO THEM.

(these guidelines are available from your Bethel Guardian or Bethel Secretary and are in compliance with the CAV training of all adults attending this activity)

Signed: _____ Bethel Daughter

Signed: _____ Parent/Guardian

IN ORDER TO BE CONSIDERED AS "REGISTERED FOR DAUGHTER RETREAT" PLEASE MAKE SURE YOU HAVE COMPLETED ALL DOCUMENTATION AND ENCLOSED THE APPROPRIATE FEES FOR PARTICIPATING IN THE RETREAT WEEKEND.

___ REGISTRATION FORM (THIS SHEET)

___ Check for \$25 (or \$50 if a Grand Bethel Member over age 20)

___ PERSONAL HEALTH FORM

___ Please send the WAIVER- I'd like to use the giant swing ___ and/or the climbing wall

PLEASE SEND ALL INFO TO:
MOM JOANN CLARKE, PGG
1200 DEER PARK ROAD, WESTMINSTER, MD 21157
PHONE: 410.751-7118
EMAIL: JCLARKE0401@YAHOO.COM

DEADLINE FOR RESERVATIONS: SEPTEMBER 1ST - * NO EXCEPTIONS *****