



COVENANT POINT BIBLE CAMP



JUNIOR HIGH WINTER RETREAT

FRIDAY FEBRUARY 24 - SUNDAY FEBRUARY 26, 2012



Come join us at Covenant Point for a weekend retreat to grow in your faith, learn from Covenant Speaker, David Gass and worship God through singing. While you are here, you can relax in the sauna, go on a polar bear dip, play broomball, go tubing in our big hill, cross country ski, hang out with friends, and play games in the canteen.

2012 JUNIOR HIGH WINTER RETREAT

What to Bring:

Sleeping bag, warm clothes, pillow, hat, gloves, skis or snowshoes, towel, toiletries, canteen money, Bible, and friends. Please don't bring iPods or MP3 players!

Check-in is from 7:30-8:00pm (central time) on Friday in the Dining Hall.

Check-out is at 12:00 noon on Sunday.

Pay \$79 - If you register by February 15

Pay \$90 - If you register after February 15.

Save \$25* - Bring a friend to camp who has never been before and you both save \$25,

Save \$15* - if you and a sibling come to camp

Cut off and send registration form with a \$25 (non-refundable) deposit or full payment (checks should be made out to CPBC) to:

Covenant Point Bible Camp

358 W. Hagerman Lake. Rd.

Iron River, M 49935

Cut Here

Registration Form

Junior High Winter Retreat - February 24-26

Pay \$79 - If you register by February 15

Pay \$90 - If you register after February 15.

Save \$25* - Bring a friend to camp who has never been before and you both save \$25,

Save \$15* - if you and a sibling come to camp

***Only One Discount may be applied to cost.**

****Counselor Fee \$30**

Name: _____ Sex: M or F Grade: _____

Address: _____ City: _____ State: _____

Home Phone: (____) _____ Email: _____

Emergency Contact: _____ Relation: _____ Phone: (____) _____

Church: _____ Name of Friend(s)/Sibling for discount: _____

My signature below indicates the previously named camper has permission to engage in all camp activities, on and off camp grounds, to be transported and to participate in outings and field trips off Covenant Point grounds. I understand that during this travel off camp grounds my child, named above, will be under the supervision of the group leaders from Covenant Point Bible Camp. I hereby give permission to the camp to provide routine, non-surgical medical care, dispense prescribed medications, and seek emergency medical or surgical treatment including ordering x-rays or routine tests. I agree to the release of any records necessary for insurance purposes. I give permission to the camp to arrange necessary related transportation for me/my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp to secure treatment, including hospitalization, for the person named above. I also give permission for photographs and video of my child to be used in future promotional materials. This completed form may be photocopied for trips out of camp.

Insurance Co. _____ Policy # _____

Please List Any Dietary Restrictions (Vegetarian, Peanut Allergies, etc)

Email our Head Cook megan@cpbc.com with questions or concerns.

Discounts Applied: _____ Total Amount Owed: _____

Enclosed Amount: _____

Signature of Parent or Guardian _____ Date _____

358 W. Hagerman Lake Rd. 906.265.2117 cpbc@cpbc.com www.cpbc.com