



Refuel is a weekend experience like no other...

It's a packed weekend full of high energy worship, biblical teaching, games, small group times with friends and leaders. Students will have a great time staying in Host Homes throughout the weekend.

**It's an experience you won't regret!**

The cost is \$50 for regular attending students, and \$20 for first time friends that join us! We will take \$5 off for EVERY FRIEND that you bring! We take bringing your friends with you THAT seriously! The cost of Refuel includes food, activities, Refuel Shirts and more!

*\*\*Registration form and payment are due by Feb. 13 at the Parent Meeting.*

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## YOUTH MINISTRY EVENT WAIVER | 2019

In consideration of the attendance of my child at Refuel Weekend, and for allowing my child to participate in this activity, I do hereby release and discharge First Baptist Church Blue Springs and all of its pastors and adult leaders acting officially or otherwise from any and all claims, demands, actions, or causes of action on account of any injury sustained by my child during said above name activity. I understand that an attempt will be made to notify the parents first. If the parents are not available, however, the youth will be taken to the emergency room at the nearest hospital as circumstances may warrant. If any conduct of the participant warrants them to be excused from participation in the event. I assume all responsibility for disciplinary action and picking up my child upon being notified by the youth pastor.

### STUDENT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City//Zip: \_\_\_\_\_

Guest Of: \_\_\_\_\_ *(We are excited to meet you!)*

Parent's Cell: \_\_\_\_\_

Age: \_\_\_\_\_ 2018-19 Grade: 6 7 8 9 10 11 12

Gender: Male // Female      Shirt Size: AS AM AL AXL AXXL

Parent's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Emergency Contact (Other than Parent): \_\_\_\_\_

Emergency's Contact Phone Number: \_\_\_\_\_

Health Ins. Health Insurance Company: \_\_\_\_\_

Insurance Company Address: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Group Number: \_\_\_\_\_

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