



FALL RETREAT

OCTOBER 15-16
FALLS CREEK
COST: \$40

PRICING :: \$40

\$55 if packet is received after October 13th

We need your packet, signed release form for both Falls Creek and Waterloo Road Baptist Church before October 13th to lock in the \$40 price. After this date the price will be \$55. You can put your packet in the black box located in the Student Building

Name of Student: _____

Grade: _____ Shirt Size: _____ Gender: M / F

Please FULLY COMPLETE these forms. **Parents and students MUST sign all forms.**
You can turn your registration packet and payment into the black boxes in the Student Building and at the Info Center.



WATERLOO ROAD
BAPTIST CHURCH

FREQUENTLY ASKED QUESTIONS

Q: Could you explain in more detail the price breakdown?

A: Your payment can be paid anytime before the retreat but we need your registration packet signed and turned in before October 13th. The price goes up to \$55 if the packet is turned in after October 13th.

Q: Are scholarships available?

A: We can provide assistance for students to go. Our desire here at WRBC is that every student that wants to go can go. We do not want money to be a hinderance

Q: How do I pay?

A: You can pay with cash, by making a check out to WRBC, or by paying online at waterloroad.org/giving and select *one time gift* and designate it to youth special events.

Q: Why are there two medical release forms?

A: One is specific to Falls Creek and covers the student while on the grounds of Falls Creek. The other is for WRBC and covers the student while the student is entrusted to WRBC, including traveling to and from Falls Creek. The WRBC Medical Release only needs to be completed annually. **If you have completed one for 2021, you do not need to complete another one.**

Q: How is medication handled at the retreat?

A: All medications must be turned in at registration on Friday morning. A designated adult sponsor will be in charge of all medications and will administer them at proper times throughout the day. Students will be responsible to remind the adult sponsor when their medications are needed. **Rescue inhaler may be kept with the student, but we do need to know at registration if he/she will have one.**

Q: Do we need spending money at the retreat?

A: Extra spending money is completely optional. All students meals will be provided (with the exception of Friday morning breakfast). We will have snacks and refreshments available in between meals. Falls Creek does have a Snack Shack on grounds that sells concession items.

Q: Are cell phones allowed on the Retreat?

A: Cell phones are not prohibited but they will not be allowed during certain parts of the event such as, bible study, evening worship, small group time. Students will be highly encouraged to have less screen time during this event and focus on connecting with other students and building community.

Fall Retreat 2021 Schedule

FRIDAY:

Noon - Arrive at church for registration

1:00pm - Depart from WRBC

2:30pm - Arrive at Falls Creek

5:45pm - Dinner

7:30pm - Session 1

8:45pm - Late Night

11:00pm - Late Night Ends / Journey to Cabins

SATURDAY

8:30am - Breakfast

9:30am - Campus Wide Prayer Experience

11:30am - Journey to Cabins/lunch

12:30pm - Free Time

3:30pm - Session 3

4:30pm - Clean Up & Load Up

6:00pm - Arrive back at WRBC

SUNDAY:

9:30am - Small Groups in Student Building

10:45am - Worship

Contact Information

WRBC Church Office :: (405) 341-9024

Steve Hall's Cell :: (405) 788-2908



WATERLOO ROAD
BAPTIST CHURCH

3100 E WATERLOO ROAD | EDMOND, OK 73034 | 405.341.9024

Stuff to Bring

One Suitcase

A Bible

A notebook and a pen

Clothes for games and free time

Close-toed shoes for games and free time (not all games will require these)

Bedding, pillow for a twin bed or a sleeping bag

Towels

Personal Hygiene items

Optional:

Snacks

Spending money

Hammock

Fishing Gear

Games

Umbrella

Flashlight

Rain Jacket

Bug Spray

DO NOT BRING

Tobacco, drugs, alcohol, or weapons

Fireworks

Inappropriate clothing

Skateboards, roller skates, roller blades.....anything with wheels

Falls Creek Conference Centers 2021 Child Release and Waiver of Claims Form

Group: _____ Cabin: _____
Participant Name: _____ Age: _____ Grade this fall: _____
Address: _____ Phone: _____
City: _____ State: _____ Zip: _____
Student E-mail: _____
In Emergency Notify: _____ Relationship: _____
Home Phone: _____ Cell or Work Phone: _____
Secondary Emergency Contact: _____ Phone: _____

1. Does participant have any known allergies or are they unable to take any medication? ___ Yes ___ No
If yes, what? _____
2. Does participant presently take any medications regularly? ___ Yes ___ No
If yes, what medications? _____
For what reason? _____
3. List any other medical condition(s) that would be helpful to know about: _____

4. Date of last tetanus immunization: _____
5. The above named child has current medical insurance coverage through:
Insurance Company: _____
Name on Insurance Policy: _____
Insurance Company Phone Number: _____ Policy Number: _____
6. Does your insurance company require notification prior to emergency health care at a hospital?
If yes, Phone Number: _____

It is the responsibility of your child's group leadership to obtain insurance permission for treatment or to limit your child's recreational activities because of a stated medical condition.

My child, _____ will be coming to BGCO Conference Centers. BGCO Conference Centers is managed and operated by the Baptist General Convention of Oklahoma ("BGCO"). I will not be coming to BGCO Conference Centers with my child. In the event that my child should need emergency medical care or attention, the BGCO or any one of its agents or employees is hereby authorized to consent to the provision of such emergency medical care, including without limitation, medical, dental, surgical care or hospitalization, to my child as is recommended or suggested by a physician, nurse, surgeon or other health care professional.

If such emergency care is provided to my child, I understand that my child's health insurance information will be given to the health care professional and that any expenses not covered by my child's insurance shall be my responsibility. I understand that the BGCO will not be obligated to pay either the health care professional or me for any medical expenses incurred on behalf of my child.

Fall Back Weekend 2021

There are instances when third party contractors are used to operate and supervise various events and activities. In those instances where third party contractors are used, I agree that the BGCO is not responsible for the action of these third party contractors. I further agree that the BGCO is also not liable for the actions or activities of participants or sponsors participating in events or activities operated by third party contractors.

I understand that the risk of injury from any recreational activity is significant, including, but not limited to, the potential for permanent paralysis and death. While particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist. I knowingly and freely assume all risks, both known and unknown, even if arising from negligence, and assume full responsibility for my child's participation and observing of such recreational activity.

Furthermore, in consideration of my child being allowed to attend BGCO Conference Centers, I, on behalf of myself and my child, hereby waive, and I hereby agree to indemnify and hold harmless the BGCO, its agents or employees, against any and all causes of action, rights, claims or suits which I or my child may have against the BGCO, its agents or employees as a result of injury to my child, including, but not limited to: (1) injuries arising from my child's participation in or observation of recreational activities at BGCO Conference Centers, and (2) injuries arising from the decision of the BGCO or its agents or employees to consent to the provision of emergency medical care to my child.

I understand that my child's image may be included in a video or in photographs that may be made at BGCO Conference Centers. I understand that a promotional or highlight video may be available for sale from BGCO Conference Centers. I consent that my child's image may appear on videos, promotional resources, camp endorsed web sites, etc.

I give authority and permission to the BGCO, its staff or its agents to inspect my child's belongings while at BGCO Conference Centers.

I understand that BGCO Conference Centers is a place where many students seek counsel and advice from adult leaders, staff, counselors and others. I hereby consent to my child receiving spiritual and emotional counsel during their time at BGCO Conference Centers.

I have received and read the Parent Information about BGCO Conference Centers including the list of the recreational options and I have received satisfactory answers to all my questions about such information.

Signature: _____ Relationship to child: _____ Date: _____

All students attending BGCO Conference Centers must have a parent fill out this release form and turn in this release form on the first day at registration.