

WHEN IS IT

Friday, September 1- Monday, September 4, 2017

Check in begins Friday at 7:00 pm and the retreat concludes at 1:30 PM on Monday.

OPTIONS TO ENJOY THE RETREAT

All Inclusive . . . \$120

Full retreat (3 nights/8 meals and all sessions and activities)

Off-Site Lodging . . . \$80

Full retreat (meals included, no lodging)

WHO CAN COME

For teens and adults age 16 and older. No younger children.

TRANSPORTATION

Streamside transportation from Philadelphia is available if needed. Location is Christ Baptist Church (1509 Church Ln.) Round-trip Cost \$50.

HELPFUL INFORMATION

- Housing is dormitory style with separate men and women's cabins. Limited housing for couples is available at additional cost.
- If you do not prefer to stay in our cabins with bunk beds, you may lodge elsewhere and pay for meals and events at Streamside. There are several hotels in the area. Hotel arrangements and payments are to be made directly with the hotel.

Local Hotels:

Days Inn (Tannersville) 888-723-3372

Best Western (Tannersville) 570-629-4100

- Bottom bunks are reserved for those over 50 years old or with special needs.
- The completed registration form and deposit fee is to be received by August 25. Checks should be made payable to **Streamside Camp** only. Once we receive your registration and deposit fee, additional details, along with your receipt and travel directions will be sent to you.
- Streamside Camp & Conference Center is a Christian camp owned and operated by BCM International. Streamside is committed to providing an atmosphere where all may come to know and grow in the Lord Jesus Christ. Smoking, alcoholic beverages, drugs, and bad language are inconsistent with its purposes, and thus will not be permitted.

This will be a multi-generational retreat. Minors will be supervised by adult leadership and will have some separate age appropriate activities in addition to retreat wide events.

Streamside Labor Day Weekend Retreat

Friday, September 1-Monday, September 4, 2017

Please complete this registration form and mail it with your \$25 per person, non-refundable registration deposit to : **Streamside Camp, 303 Possinger Dr., Stroudsburg, PA 18360**

Last Name _____ First Name Mr. Mrs. Ms. _____

Address _____ City _____ State _____ Zip _____

Home Phone (_____) _____ Cell Phone (_____) _____ Email _____

I am 18 years old or older

I am under 18 years old Birthdate: __/__/____ (If under 18, parent or guardian must sign consent at bottom of registration)

SPECIAL NEEDS OR DIETARY RESTRICTIONS:

ROOMMATES (please list only two):

1. _____
2. _____

I am over 50 or have special needs and require a bottom bunk

AREAS OF SERVICE (optional):

Cabin Host - Assist guests and lead cabin devotions

Prayer Partners - Lead prayer circles and be

available to pray for guests as needed

Streamside Choir

REGISTRATION:

Amount Due

\$120/person, All Inclusive \$ _____

\$80/person, Full Retreat (staying at hotel) \$ _____

Streamside Transportation, \$50/person - Due NOW \$ _____

\$25/person Deposit (non-refundable) - Due NOW \$ _____

-\$50 deduction for Streamside Campership -\$ _____

(refer to website for eligibility)

TOTAL amount sent with Registration Form \$ _____

Balance Due - Can be paid before or at check-in time \$ _____

ONE-LINE REGISTRATION: www.streamside.org/LaborDay2017

AUTHORIZATION FOR TREATMENT AND CONSENT

I hereby give permission to the medical personnel selected by the Streamside Camp director to order X-rays, routine tests, and transportation as deemed necessary for me/my minor child. If I am unable to be contacted in an emergency, I hereby give permission to the medical personnel selected by the Streamside Camp director to secure and administer treatment, including hospitalization, for the person named above. The person herein described has permission to engage in all prescribed camp activities except as noted. I understand that there are risks inherent in camp activities and agree to hold BCM International/Streamside Camp and Conference Center, its staff, volunteers, directors and officers blameless in all instances. Should it become necessary for me/my child to return home for medical or disciplinary purposes, I will arrange for transportation at my expense within four (4) hours of the request. I agree to allow BCM International/Streamside Camp and Conference Center and Christian Camp and Conference Association to use audio, video, still pictures and stories of myself and/or my child for promotional purposes. By my signature, I consent to these statements and grant such authorizations.

SIGNATURE of parent/guardian or adult camper _____

Date ____/____/____