

High School Retreat 2022

MEDICAL RELEASE FORM AND PARENTAL PERMISSION FORM

Cost: \$30

When: Tuesday, Sept 6, 1:36 PM to Thursday, Sept 8, 3:30 PM

Event Name: ANNUAL HIGH SCHOOL RETREAT

Place: Arrowpeak Lodge, Highwood, MT

Date(s): September 6-8

Tuesday, September 6, 2021 – 7:30AM all students in 9th thru 12th grade should be at Foothills. They will attend classes, lunch, and advisory at school until 1:36. All students should bring all their retreat items, snacks and clothing for the entire retreat to school with them that morning. Please pack LIGHT as transportation space is limited!

Transportation: Students will be transported to Arrowpeak Lodge, Highwood, MT by chaperones, either in the chaperone's personal vehicle, the school's bus, or a church bus. Students will be paired up with their chaperone driver about 1:30 and will travel directly to Arrowpeak Lodge, Highwood for the Retreat. At Arrowpeak Lodge, there are separate sleeping cabins for boys and girls.

Sessions: There will be student led devotions daily. There will be games and team relay races as well as 2 guest speakers, Aleric Hebert and Joseph Yeisley, who will deliver 4 sessions of an awesome word! (Please email Mrs. Morrison for more information on these speakers.)

Pranks MUST be pre-approved by Mrs. Morrison. Any prank must not begin before 8AM and any kind of prank must end by 10PM. Any pranks not pre-approved by Mrs. Morrison will be subject to punishment not limited to students being sent home and/or 1 to 2 days of detention. Students may contact Mrs. Morrison at cmorrison@foothillschristian.org to approve pranks.

Food: Students may bring snacks, but all meals are provided. The school **NO NUT** rule applies at Retreat. All meals are planned and will be prepared by the students themselves. The menu is:

Tuesday dinner - - alfredo - chaperones

Wednesday breakfast - - pancakes, sausage, a no-pork meat option, fruit - Freshman

Wednesday lunch - - turkey/cheddar sliders - Sophomores

Wednesday dinner - - hamburgers - Juniors

Thursday breakfast - - bagels/muffins, fruit - Seniors

Thursday lunch - leftovers - STUCO

Social Media: We ask that students refrain from social media while at Retreat. This is a time to get to know your fellow students and they will all be right there, so no social media is needed. You are welcome to have your phones for photos though!

Cost: Students are asked to bring \$30 each to offset the cost of food and snacks for 5 meals, plus the accommodations.

Return: Students will return to school no later than 3:30 PM on Thursday, September 8, possibly as early as 2:30. (If we arrive back early, your student will get in touch with you.) The land line for the Retreat in case students need to be reached in an emergency is 406-733-2101. The non-emergency line is 406-733-2267. Please call Carrie Morrison at 406-217-4741 with any questions.


Chaperones: Retreat Chaperones are Dusty Bauer, Karen and Greg Beeler, Kerri Koteskey, Iain Morrison, Paul Munson, Damian Shaw. All chaperones will be driving students to retreat.

Permission Forms: Please read and sign ALL permission/release statements on the next page. Return only the permission/release statement page to Mrs. Morrison by 7:30 Tuesday morning (Sept 6) along with your \$30.

PARENTS/GUARDIANS PLEASE SIGN ALL 4 RELEASES


STUDENT Name: _____ Birth Date: _____

I give permission for my child to attend the Foothills Community Christian School event listed above.

Signature of Parent of Legal Guardian  _____ **Date** _____
Phone Number (in case of emergency) _____

Medical Release to Grant Consent

I hereby request and authorize the FCCS chaperones and agents, hospitals, licensed medical or dental providers, and their agents and employees to have access to the information contained in this form to provide all medical or dental care, routine tests, treatment, and necessary transportation advisable for the health and safety of my child. This authorization includes the authority to consent to any x-ray examinations, anesthetic, medical procedure or treatment, and hospital care under the supervision, and upon the advice of or to be rendered by, a physician or surgeon licensed under the Medical Practice Act or dentist licensed under the Dental Practice Act for my child.

Signature of Parent of Legal Guardian  _____ Date _____

Activity Release

I further give permission for my child to participate in all supervised activities (please sign below and write exceptions if any):

Signature of Parent of Legal Guardian  _____ Date _____

Release of Activity Liability Statement

I hereby release Arrowpeak Lodge and Chaperones for Foothills Community Christian School from the responsibility of any liability involving injury or accident to my child participating in the activity listed above on the given date listed. I, as the parent or guardian of the participant listed above, hereby release Foothills Community Christian School from the accident or injury causing circumstances and will accept full responsibility for my child's actions.

Signature of Parent of Legal Guardian  _____ Date _____