



INFORMATION SHEET

- Who?** All rising sixth graders- rising college freshman throughout Pitt County.
- What?** A week-long local missions camp.
- When?** August 4-6, 2011
- Why?** To unify the youth of Greenville as One Body to share Christ through outreach, prayer, and acts of service. Ephesians 4:4-6: "There is One Body and one spirit- just as you were called to the hope that belongs to your call- one Lord, one faith, one baptism, one God and Father of all who is over all and through all and in all."

DETAILS

Check-in: Every morning starting Thursday, August 4th - Friday, August 6th at COLLIDE Ministries located at 211 W. 9th Street.

Check-out: Every afternoon starting Thursday, August 4th through Friday, August 6th at 4:30pm at COLLIDE Ministries.

Typical Day at One Body...

8:30 AM	Check-in and Breakfast
10:00 AM	First Session, Worship, Message
11:00 AM - 2:15 PM	Work Sites, Lunch, Prayer
2:30 PM	Second Session, Worship, Small Groups
3:45 PM	Debrief, Testimonies
4:15 PM	Debrief, Testimonies
4:15 PM	Dismiss

Students will spend their week with their Family Group. A Family Group consists of 1-2 leaders per 10 students. Students will have devotional time each morning with their Family, travel with their Family to their mission site each day, and debrief every afternoon with their Family. In debrief time students will discuss with their Family Group what they experienced at the mission site that day, what



STUDENT REGISTRATION

If your home ministry is participating, turn into your leader by **ASAP**. . If you are registering independently of a church, please mail to 309 W. 9th St. Greenville, NC 27834 or bring with you on **August 4th**.

STUDENT INFORMATION

Full Name _____ Home Church/Ministry _____

Date of Birth _____ Age _____ Male Female Shirt Size* _____ School _____ Grade (in fall) _____

Home Address _____ City _____ State _____ Zip Code _____

Student's Cell Phone _____ Parent's Name _____ Parent's Cell Phone _____

***T-shirts are \$10 for students who pre-register. If you register on the first day of the event, shirts go up to \$15.**

MEDICAL INFORMATION

Please list any known allergies or medical conditions _____

Insurance Company Name _____ Policy Holder's Name _____ Emergency Contact's Name _____

Member/Policy Number _____ Policy Holder's Date of Birth _____ Emergency Contact's Phone _____

CONSENT TO MEDICAL CARE & TREATMENT

In the case of an emergency, I hereby authorize One Body staff members to seek medical treatment for my child, _____, if I cannot be contacted.

Parent/Guardian Signature

Date



RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, _____ ("Participant"), acknowledge that I have voluntarily applied to participate in activities associated with One Body 2011.

I AM AWARE THAT THESE ACTIVITIES MAY INVOLVE TRANSPORTATION AND SUCH SITUATIONS WHICH MAY OR MAY NOT BE INNATELY DANGEROUS AND I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH THE KNOWLEDGE OF ANY DANGERS INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

I verify this statement by placing my initials here: _____

Parent or Guardian initials (if under 18): _____

As consideration for being permitted to participate in projects associated with One Body 2011, I forever release One Body 2011 including respective directors, officers, employees, volunteers, agents, contractors and representatives from any and all actions, claims, or demands that I, my assignees, heirs, or next of kin may have now or in the future, for injury, death, or property damage, related to my participation in these activities, the negligence or other acts, whether directly connected to these activities or not or the condition of the premises where these activities occur, whether or not I am participating in the activities. I also agree that I, my assignees, heirs, or next of kin and legal representatives will not make a claim against, sue, or attach the property of any Releasee in connection with any of the matters covered by the foregoing release.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY BETWEEN MYSELF AND ONEBODY 2011 AND SIGN IT OF MY OWN FREE WILL.

PARTICIPANT/RELEASOR

PARENT/GUARDIAN