

2008 Girls Summer Retreat

***** Getting to know each other and God*****

Who: All St. Andrew's female Youth and their female friends

When: July 25th at 10:00am – July 27th at noon

Where: Houston, Tx

What: A terrific opportunity to bond with Jesus and with each other.

Cost: \$50.00

***** E-mail dmillikin@sapch.org to RSVP or for questions. *****

Summer Retreat Permission Slip

Name _____ Age _____ School _____ Grade _____ Shirt size _____

Address _____ Zip _____ Home Phone _____

Name and relationship of person to call in emergency _____

Emergency Phone Number _____

I hereby give permission for my youth, _____, to travel to and participate in the following activity: Summer Retreat. We will leave St Andrew's PC on Friday, July 25th at 10:00 a.m. and return at Sunday, July 27th at noon

I understand that my youth will be transported to and from this activity by vehicles operated by individuals who are willing to support our youth program. I understand that only general adult supervision of the youth can be given. I agree to release St. Andrew's Presbyterian Church, its' volunteers, and staff from any liability for my youth while this activity is in progress, including transportation to and from the site.

In the event of an emergency in which medical treatment for my youth is necessary and neither parent can be contacted immediately, I hereby authorize any hospital or physician to implement such treatment as may, in their opinion, be necessary. I agree to assume all financial responsibility of said treatment. Please indicate any medical history you feel necessary for emergency purposes.

Parent Signature

Date