

SET APART

Retreat/Prom Alternative
(Formerly Marshall County Jr/Sr Banquet)

April 28th-30th

The Set Apart Committee cordially invites and encourages you to attend this year's Retreat. We are planning a great weekend of food, fun, and fellowship. We look forward to seeing you there!

WHAT WE WILL BE DOING:

- Travel to/from our lodging destination
- Fireside Singing
- Devo by the water
- Games/Hangout Time (most cabins include activities)
- Meals together
- Outing for Jr's/Sr's
- Pictures (in formal/dress attire)
- Sunday morning worship at area congregation

DRESS CODE (including formal/dress wear):

Modesty will be maintained at all times. All dresses, skirts, and shorts must touch the knee. No transparent or form fitting clothing. Yoga pants and leggings may be worn as long as a material (t-shirt, jacket, dress, ect.) is covering the behind. No low cut/revealing/strapless tops. Tops must overlap pants (no visible midriff). No swimsuits will be allowed. Clothing may not contain profanity or inappropriate material or references.

If you have questions regarding dress code, please contact us. **Failure to adhere to dress code may result in limitation of activities.**

Cost:

\$150- Includes all expenses for 3 days. (does not include souvenirs/shopping/rest-stop snacks)

Lodging

Transportation

Activities

Meals/Snacks

*At your request we can provide a letter of sponsorship for you to give to your Elders or congregation.

*Please fill out the information on this page and e-mail to:
setapartyouthretreat@gmail.com*

All Applications must be received by April 16th, 2023

Required Information

Church Home (if you have one): _____

School: _____

Grade: _____

Guardian 1: _____

Guardian 2: _____

Allergies/Medical: _____

Name: _____ Phone: _____

Address: _____

I give my permission for my child _____ to participate in the Set Apart Retreat on April 28-30, 2023. I understand that the group will be traveling either by church van, rental vehicle, or personal vehicles driven by licensed adult chaperones and will be staying for a set number of days and nights ?area. I hereby release the Set Apart Retreat Committee and volunteers from responsibility and liability for any injury that my child may sustain during this activity. In the event of an emergency, I hereby authorize an adult leader of the activity as an agent for me to consent to any x-ray, examination, medical, or dentist (as appropriate), licensed to practice under the laws of the state in which services are rendered, either at the doctor's office or hospital. I expect to be contacted as soon as possible.

Signature of Parent or Legal Guardian: _____ Date: _____

Emergency Contact Information & Phone #: _____

Primary Insurance and Policy Number: _____

Please read the Application in it's entirety. By signing below, I agree to the adhere to the policies listed above.

Student: _____ Guardian: _____