



Merom Camp & Retreat Center, Inc.  
PO Box 127 Merom, IN 47861

www.Merom.org  
800-313-4511

### Health Form

**This health form *must be turned in* to attend the event.**  
Please bring a copy of health insurance card.

Name of Event: \_\_\_\_\_ Dates of Event: \_\_\_\_\_

**Notice of interpretation:** This form is to be completed and signed

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship \_\_\_\_\_

1. List allergies, dietary restrictions or allergies to medications: \_\_\_\_\_

2. Date of last tetanus shot \_\_\_\_\_

3. List current medications: \_\_\_\_\_

4. Are there any physical limitations that would prevent participation in any event activities? Yes No

If yes, please describe \_\_\_\_\_

5. Please list any recent illness \_\_\_\_\_

6. I authorize the MCRC/event staff to administer current medication as per instructions. I also give permission for the following medication as needed: antacid, antihistamine, decongestant, acetaminophen, aspirin or ibuprofen. (Cross out any not acceptable.)

**In the event of an injury or illness requiring medical attention I hereby give permission for the MCRC/event staff to provide: medical care; emergency transportation; physician; and purchase prescribed medications. I give permission to the medical personnel to provide treatment, routine tests and order X-rays. I give permission to the physician/health care personnel to hospitalize; secure proper treatment; provide injections, anesthesia and/or surgery.**

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

Health Insurance Co \_\_\_\_\_

Policy # \_\_\_\_\_ ID# \_\_\_\_\_

Claims Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

*MCRC is secondary to your personal insurance:*

Claim # \_\_\_\_\_

Adult Retreats 18 and up  
www.ikcucc.org or www.merom.org



Address Service Requested

Merom Camp & Retreat Center  
PO Box 127  
Merom, IN 47861

**Retreats for Adults!!**

# Retreats for Adults

18 and up  
Be a Camper again!  
Something for everyone!



Spring & Fall 2017



**Merom Camp & Retreat Center, Inc.**

GPS Address: 8555 Phillip  
PO Box 127, Merom IN 47861  
800-313-4511 or 812-356-4511  
www.merom.org

Non-Profit Org.  
US POSTAGE  
**PAID**  
Indianapolis, IN  
Permit No. 4389

### Alumni Weekends

May 18-20, 2018  
Oct 19-21, 2018

This weekend retreat is for graduates of all Merom summer camps to get together with old friends to share their journeys since leaving camp for the last time. Explore how camp impacted your transition into becoming a young adult. This weekend includes service project time to decrease the fee.

**Leaders:** Kari Anderson, Samantha Barrett, Luke Lawson  
May 17-19, 2019  
Oct 18-20, 2019

### Bible 101 - spring

March 9-11, 2018

Adam & Eve, original sin, Augustine and sex...what is the history of our faith relating to Genesis' most famous couple and how has St. Augustine shaped our conversation around sin and sex for over 1,500 years? Come to "Bible 101" in March and join in our discussion as we unpack all of these things together.

**Leader:** Rev. John Sterrett

### Quilting & More ...

(sewing, needlework, yarn crafts)  
March 9-11, 2018  
September 14-16, 2018

A time for retreat from everyday life and focus on fellowship & projects! Activities include Bible study, quilting and/or scrapbooking. People also knit, crochet, cross stitch and needlepoint!

**Beginners:** We have equipment and supplies to learn.  
**Experienced:** Learn something new, share ideas, join the fun.

Bring all your tools, projects, machines, questions and ideas!

#### Retreats

Parking will be in a designated area. This is to be a retreat away from your daily life.

#### Please Bring:

Bible, towels, bedding, jacket, flashlight, warm clothes, personal items, clothes for work projects.

#### Do not Bring:

Alcohol, drugs, snacks, weapons.

## Retreats for Adults at Merom

Circle retreat you are registering for (only one retreat per form):

### Alumni Weekend

May 18-20, 2018  
Oct 19-21, 2018  
\$60 per person

### Bible 101

March 9-11, 2018  
\$105 per person

### Quilting and More ...

March 9-11, 2018  
September 14-16, 2018  
\$105 per person

### Simple Crafts

October 26-27, 2018  
\$150 for 2  
(adult/child option)

Participant's Name \_\_\_\_\_ Gender: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ E-text (cell #@provider): \_\_\_\_\_

Church \_\_\_\_\_ Town \_\_\_\_\_ IL IN KY

Meal preference: Vegan Vegetarian Meat Eater

Roommate(s): \_\_\_\_\_

Food Allergies/Special Diets: \_\_\_\_\_

*Photos and videos may be taken by camp staff, counseling staff and campers to use for photo CDs, promote camp programs and displayed on the website (may include commercials on You Tube, social network sites, phones).*

#### Informed Consent

I acknowledge that my participation and/or the participation of my minor child in activities at the Merom Camp & Retreat Center (MCRC) entails known and unanticipated risks which could result in physical or emotional injury, paralysis, death, or damage to myself and/or my minor child, to property, or to third parties, I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activities. I hereby voluntarily release, forever discharge, and agree to indemnify and to hold harmless the MCRC. from any and all claims, demands, or causes of action, which are in any way connected with my/my child's participation in these activities or my use of the equipment or facilities, provided however, that this covenant shall **not extend to liabilities incurred from any negligent acts or omissions on the part of MCRC or the officers, agents, employees or volunteer staff.**

Participant's Name printed \_\_\_\_\_

Participant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Make checks payable & mail to:** Merom Camp & Retreat Center (MCRC)  
PO Box 127 Merom, IN 47861

#### Cancellation/Refund Policy:

1 week prior to event = 100% refund  
Week of event = less 10% & expenses  
Day of event = no refund

For office use

Date: \_\_\_\_\_ Church or Personal

Check #: \_\_\_\_\_ Amount: \_\_\_\_\_

## Retreats for Adults

Arrive: 7-9 pm  
Departure: 11am

MAKE CHECK PAYABLE TO:  
MEROM CAMP & RETREAT CENTER

Mail to:  
Merom Camp & Retreat Center, Inc.  
PO Box 127  
Merom, IN 47861

Late registrations welcome  
- please call ahead.

Questions? Susie Larson  
Cell/text 317-445-8754  
Merom: Susan@merom.org



www.merom.org

## Merom Programs

Events are planned and carried out by Merom's program group. If you are interested in leading an event, helping at an event or would like to be on the program team, please contact the Merom office: 800-313-4511 or 812-356-4511

## Healthy Living

Coming soon

Based on the passages from Daniel, this weekend focuses on body, mind and spirit. Join us for some new ideas on how to live as God's own.

Coordinator: Nancy Menke  
Cooking: Kathy Keller

Yoga: Lisa Rasche  
Chaplain: open