



SOCC Student Ministry New Registration Policy

Sherwood Oaks has made good stewardship a priority and our student ministry strives to do the same. Beginning with CIY Move, a non-refundable* deposit will secure your students spot on all student ministry conferences. In some instances, an early bird rate will be offered.

God has blessed us with a growing student ministry. That also means Sherwood Oaks' payments to conference organizations are growing and have the potential to incur large penalties because of late registrations. Our hope is to avoid those penalties by implementing this deposit system. Please contact us with any questions.

*A full refund will be given if a student on our waiting list is able to take your place.



Information for Parents

1. We'll meet at the church at 2:00pm on Sunday, July 21 in the Fellowship Hall. Our estimated return time is 11:00pm on Monday, July 22.
2. Remember, your child will need money for 2 meals for the way up and back (amusement park food is more expensive).
3. If you need to get a hold of John in case of an emergency, he can be reached at 812.369.3501.
4. Your student will stay at a local St. Louis church the night of Sunday, July 21 then head to Six Flags St. Louis all day on Monday, July 22.

PAYMENT:

An early bird payment of \$50 is due by Sunday, June 23.

The regular rate payment of \$65 is due by Sunday, July 7.

Three ways to pay:

1. **Cash**
2. **Check (made payable to SOCC)**
3. **Debit/Credit Visit www.soccstudents.org**

PACKING LIST:

- Pajamas
- Toiletries (toothbrush, brush, etc)
- Towels and washcloths
- Flip-flops for the showers
- Bedding/Sleeping Bag
- Clothing for summer and raining weather

- Appropriate bathing suit
- A watch or something to keep time with so that you can always know what time it is!
- Money for 4 fast food meals
- Optional money for souvenirs

Remember, you are attending a Christian function, so bring appropriate clothing and swimsuit. If you question whether or not it's appropriate, ask an adult or play it safe and leave it at home.



Student Registration Form
Sherwood Oaks Christian Church
2700 E. Rogers Road
Bloomington, IN 47401

Check event:
 High School CIY Move
 High School St. Louis Trip

1

Parent/Guardian Contact Information

Name _____ Contact Phone Number _____

2

Student Registration

Name _____ Age _____ Grade _____

Street Address _____

City _____ State _____ Zip Code _____

Home Phone Number _____ Email Address _____

Food allergies or restrictions _____

Current Medications _____

If listed medications above, does an adult need to be responsible for the keeping and/or administering of medications?

Yes No

If yes, please list instructions _____

Medical Insurance Co. _____ Group# _____ Policy/ID# _____

3

Rooming Requests (optional)

Please list up to three friends:

1. _____ 2. _____ 3. _____

4

Parent/Guardian Agreement

I give the participant listed above permission to participate in activities sponsored by Sherwood Oaks Christian Church. I authorize an adult, in whose care the minor has been entrusted, to consent to any X-Ray examination or medical or dental treatment to be rendered to the minor on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. I agree to pay all costs and expenses incurred in connection with such medical and dental services rendered to my child pursuant to this authorization. Should it be necessary for my child to return home due to medical reasons or otherwise, the signed shall assume all transportation costs. I give permission for my child to ride in any vehicle designed by the adult in whose care the minor has been entrusted while participating in activities sponsored by Sherwood Oaks Christian Church.

In consideration for the participation in activities sponsored by Sherwood Oaks Christian Church ("Church"), the signed, for myself and my child, hereby release and forever discharge Church and all other persons associated with Church, from any and all actions, causes of action, claims and demands, known or unknown, which I or my child participating in activities sponsored by Church may now have or may have in the future on account of or arising out of any accident, casualty or event which may occur while under the direction of Church ministries or arising out of participating in activities sponsored by Church. I acknowledge that there is no worker's compensation or accident insurance furnished by Church.

This release of liability is binding on the signed, the child of the signed participating in activities sponsored by Church, all persons claiming through the signed or said child, and the heirs and personal representatives of the signed and said child.

I have read this release and understand all of its terms. I agree with its terms and sign it voluntarily.

Parent/Guardian Signature _____ Date _____