

Spring Youth Retreat

Presbytery of the Northern Plains "Youth Connection Team"

May 1-3, 2026; 1st Pres. Church – Moorhead

Grades 6-12

Youth and Adult Participant Information:

Full Name _____ Age ____ Grade ____ Gender ____

Address _____ City _____ State ____

Home Phone _____ Personal Cell Phone _____

Home Church _____

Allergies? *(please list)* _____

Medications? _____

**Please let Chaperone or Event Leader know if Medications should be paid attention to.*

Emergency Contact Information:

Parent/Guardian Name(s) _____ Relation _____

Phone # _____ Cell # _____

Email Address _____

Medical Insurance Carrier _____

Policy # _____

Medical and Photo Release for Treatment of a Minor

I/We, the undersigned parents of _____, a minor, do hereby authorize the Presbytery Youth Leader Representative as agent for the undersigned to seek the appropriate medical attention for my child, should such attention be required while my child is attending or in route to and from the Youth event.

I hereby give permission to the treating physician to order x-rays, routine tests, and treatment for the health of my child, and in the event I cannot be reached in an emergency, I hereby give permission to the treating physician to hospitalize, secure proper treatment for and to order injections and/or anesthesia and/or surgery for my child as named above.

I authorize and trust Presbytery of the Northern Plains to safely publicize pictures of my child through electronic media, print, broadcast, or any other means of communication.

Parent/Legal Guardian Signature _____ Date _____

Participant Agreement (Youth and Chaperones)

No weapons (knives, etc.), drugs, alcohol, or tobacco products allowed. Everyone will participate in all scheduled activities and honor all meetings times. Any infraction will be dealt with by the Youth committee and if sent home it will be at your own expense. I understand and will comply with the above rules:

Participant's Signature _____ Date _____

Please return form asap but no later than April 15th to Jamie Norstog either by mail to 2900 5th St. S. or email to jnorstog@gmail.com. No charge for this retreat as Youth Connection is covering the cost.