



## Ellim Korean Presbyterian Church Summer Retreat 2014 Registration

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### Retreat Information

**Date:** 7/2/2014-7/4/2014  
**Place:** NJUCA (73 Holmes Mill Road, Cream Ridge NJ)  
**Guest Speaker:** Pastor Daniel Lee

### Student Information

Name: \_\_\_\_\_ Gender: M / F  
Date of Birth : \_\_\_\_\_ Age: \_\_\_\_\_  
Student Email: \_\_\_\_\_  
Student Cell #: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_

### Emergency Contact Information

Father's Name: \_\_\_\_\_ Phone \_\_\_\_\_  
Mother's Name: \_\_\_\_\_ Phone \_\_\_\_\_

### Medication Information

List all allergies to medications, food, insect bites, and environmental factors:

\_\_\_\_\_

I give consent for Ellim Administrations to administer nonprescription medications to my child on an as-needed basis. Y / N  
Does your child have take medication during the summer retreat? Y / N

If Yes,

Drug Name	Dose	Time Given	Reason

### Summer Retreat Consent and Agreement

#### Students

1. I will follow all directions by adult staff and follow all camp rules at all times.
2. I will use proper behavior and do nothing detrimental to the safety and well-being of myself and others.
3. I will use polite language and good manners at all times, including meals.
4. I will help keep facility clean and tidy, including keeping clean their personal areas.
5. I will sleep only in his/her assigned cabin and bed each night.
6. I will be only in the proper area. No boys in the Girls' area and no girls in the Boys' area.
7. I will respect the quiet hours from Lights Out until 8:00 AM.
8. I will **never** smoke or use alcohol or drugs.
9. I will **never** bring or use any weapons or engage in any vandalism or theft.
10. I will **never** bring any food, video, Internet devices, phones, computers or other cellular devices.
11. I understand that bringing any unauthorized items may result in immediate dismissal.
12. I have read and I understand the Behavior Agreement. To the best of my ability, and with respect for all, I will think before I act, use my common sense, and follow our rules at summer retreat.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

#### Parents

1. The information I have provided on this form is accurate and complete.
2. I give my child a permission to attend **The Fourth Annual Summer Retreat** sponsored by **NJEKPC** during 7/2/14 - 7/4/14.
3. I understand that NJEKPC carries no medical insurance of any kind for students. Regardless of my insurance status, I release NJEKPC from any responsibility and liability for my child's injuries, illness, medical bills, charges, or similar expenses. I understand that I am fully responsible for all medical costs incurred by my child.
4. I give my permission for my child's picture to be used in NJEKPC web site.
5. I have read and I understand the rules and regulations of Ellim Summer Retreat. I have helped my child to understand what is expected of him/her.

**Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_