

Registration for 2024 FALL YOUTH RETREAT, Nov. 15-17, 2024

Church \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Contact Person's email \_\_\_\_\_

Email of Responsible Adult who will be at Retreat \_\_\_\_\_

**NOTE:** For each 1-7 youth, you need at least 1 adult. If your group has both male and female youth, you are asked to have at least one male and one female adult, if possible.

| Name     | Grade (for youth)/A (for adult) | Gender |
|----------|---------------------------------|--------|
| 1. _____ |                                 |        |
| 2. _____ |                                 |        |
| 3. _____ |                                 |        |
| 4. _____ |                                 |        |
| 5. _____ |                                 |        |

*Additional names may be placed on the back of this form or on a separate page.*

**Special Needs:** If you have participants with special needs, please note below. These should also be noted on the medical forms that participants bring with them.

\_\_\_\_\_  
\_\_\_\_\_

**Dietary Concerns/Food Allergies:** Note below if you have participants with food allergies or those who are vegetarians or vegans or have other dietary concerns. Allergies should also be included on medical forms. ***It is very important to know these in advance.***

\_\_\_\_\_  
\_\_\_\_\_

Register online as a group and pay with credit card at: **OR**  
[www.wvpresbytery.org](http://www.wvpresbytery.org)

Mail form with a check to:  
**Presbytery of West Virginia  
c/o Susan Sharp Campbell  
683 Dwyer Lane  
Lewisburg, WV 24901**

Registrations and payment should be received by Monday, Nov. 4.  
Checks should be to WV Presbytery.

**Volunteer Information Forms and Background Check Release Authorizations for all registered adults must be returned with registration so that they can be completed BEFORE the retreat.**

Questions? Susan Sharp Campbell, Associate for Educational Ministry, (304) 667-9428 or  
susan\_sharp\_campbell@hotmail.com.