

# Women's Retreat: September 16-18, 2022

(Arrival & check-in begins at 4pm on September 16)

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_ Phone & Type \_\_\_\_\_

Birthdate      /      /      T-shirt\* size (adult sizes): S M L XL 2XL 3XL  
*MM DD YY* *\*Please add \$3 for 2XL and 3XL shirts*

Church/Group Name \_\_\_\_\_ Roommate Request(s) \_\_\_\_\_

Do you have any food allergies? If so, please list them here: \_\_\_\_\_

## Registration Options **(Mark your preferences. Choice not guaranteed. All options include five meals: Friday supper-Sunday brunch.)**

- 1) Standard Housing (\$100/person): *Main Lodge Welcome Center Bunkhouse Lodge 139*
- 2) Inn Housing (\$120/person)
- 3) Shirt Fee: Please add \$3 for a 2XL or 3XL shirt

## Payment **(Full payment required to register.)**



Total due: \$ \_\_\_\_\_

- 1) Check # \_\_\_\_\_
- 2) Credit Card Type (Please circle):  Visa  MasterCard  Discover  Amex  
Name on Card: \_\_\_\_\_ CC#: \_\_\_\_\_  
Exp. Date: \_\_\_\_\_ Card Security Code: \_\_\_\_\_ Signature: \_\_\_\_\_  
Billing Address (if different from above): \_\_\_\_\_  
*Address City State Zip*

**Medical & Liability Statement:** I (or my parent/guardian if I'm a minor) acknowledge that participation in camp activities involves risk to myself and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage and financial damage.

In consideration for the opportunity to participate in camp activities, I (or my parent/guardian if I'm a minor) acknowledge and accept the risks of injury associated with participation in camp activities as well as transportation to activities, if applicable. I (or my parent/guardian if I'm a minor) accept personal financial responsibility for any injury or other loss sustained during camp or during transportation to activities, if applicable, as well as for any medical treatment rendered to me that is authorized by Hidden Acres or its employees, volunteers or any other representatives (collectively, referred to hereinafter as "Hidden Acres Christian Center"). Further, I (or my parent/guardian if I'm a minor) release and promise to indemnify, defend and hold harmless Hidden Acres Christian Center for any injury arising directly or indirectly out of camp activities as well as transportation to activities, if applicable, whether such injury arises out of the negligence of Hidden Acres Christian Center, myself, or otherwise.

If a dispute over this agreement or any claim for damages arises, I (or my parent/guardian if I'm a minor) agree to resolve the matter through a mutually acceptable alternative dispute resolution process. If Hidden Acres Christian Center and I (or my parent/guardian if I'm a minor) cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution pursuant to the rules of the American Arbitration Association.

**Media Statement:** I (or my parent/guardian if I'm a minor) hereby grant permission to Hidden Acres Christian Center to record, by videotape, photograph, or other means of reproduction, the voice, image, and physical likeness of my camper and to use any such recorded material for promotional and marketing purposes, such as printed brochures, social media websites, the Hidden Acres Christian Center website, and other forms of electronic publications, without further consent or compensation.

**THIS IS A RELEASE, WAIVER, AND INDEMNIFICATION AGREEMENT – READ CAREFULLY BEFORE SIGNING.** If you are in agreement with and understand the statements above, please sign below. If you do not sign below, your registration will be considered null and void, it will not be accepted by Hidden Acres Christian Center, your payment will be returned, and you will not be registered for this event. If you are a minor, a parent/guardian signature is required for your registration to be accepted.

\_\_\_\_\_  
*Participant signature, if an adult*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent/guardian signature, if participant is a minor*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent/guardian signature, if participant is a minor*

\_\_\_\_\_  
*Date*

## Registration Submission Options

- 1) **Mail** to Hidden Acres Christian Center, 3837 Union Ave., Dayton IA 50530, OR
- 2) **Fax** to Hidden Acres at 515-547-2752, OR
- 3) **E-mail** to [rachelle.rasmussen@hacamps.org](mailto:rachelle.rasmussen@hacamps.org)
- 4) **Groups:** Please have each member fill out a copy of this form or register online. No group form is available. We can easily house your group together if you tell us your group name and roommate requests above.