

Sportsmen's Retreat: March 23-26, 2023

All attendees must be at least age 8 by 3/23/2023

Arrival & check-in begin at 4pm on Friday, March 24

Early arrival options available for an additional fee – See below!

Name _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone & Type _____

Birthdate / / T-shirt* size: YOUTH: S M L ADULT: 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: _____

A) Housing: Where would you like to stay? Includes Friday supper – Sunday brunch unless otherwise stated. Choice not guaranteed.

- Standard Housing (\$140/person):** Main Lodge, Welcome Center, Johnson Lodge, Treetoppers, Bunkhouse, Family Life Ctr
- Inn Housing (\$160/person)**
- RV or Tent Camping (\$110/person):** Electric sites. Guests staying with you also pay \$110 each.
 - a. Bringing your own RV/Tent? What size is it? _____
 - b. Staying in a friend's RV/Tent? What is your friend's name? _____
- Hickory Grove Cabin (\$110/person):** No installed heat; kerosene heaters available. Restrooms in nearby showerhouse.
- No Housing Required (\$80/person):** For people staying off-site and commuting to Hidden Acres each day.
- Only Attending Saturday (\$60/person):** No housing; includes three meals on Saturday.

B) Arrival Time: When would you like to arrive?

- Thursday, March 23rd, after 4pm:** Add \$50/person. Includes Thursday supper – Friday lunch.
- Friday, March 24th, after 9am:** Add \$10/person. Includes Friday lunch.
- Friday, March 24th, after 4pm (standard arrival time):** No additional fee.
- Saturday, March 25th, after 7am:** No additional fee.

C) T-Shirt Fee: Do you need a 2X or 3X shirt? If yes, add \$3 to your total.

Total due (A + B + C): \$ _____



Full Payment due now. Submit form with a check or pay with a credit card below.

Check # _____ OR Circle Card Type: Visa MasterCard Discover American Express

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 to record, by videotape, photograph, or other means of reproduction, the voice, image, and physical likeness of myself 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

Submission Options: 1) Mail (3837 Union Ave, Dayton, IA 50530) 2) Fax (515-547-2752) 3) Email (rachelle.rasmussen@hacamps.org)