DECO-TEC CANDIDATE APPLICATION

A Weekend Retreat for Teens Ages 14-19

Name:	Age:	DOB:
Email:	Church:	
School:	Grade:	
Address:	City:	Zip:
Phone () Pare	ent's Names:	
Name of person(s) sponsoring you at De	eco-TEC:	
Medical Release Inform	ation (please print)	
Emergency Person:		
Emergency Phone:		
List any Allergies:		
List any Health Problems:		
Any Regular Scheduled Medications:		
If so, what are they:		
How much and how often:		
Can we administer Tylenol, over the cou		
YES	NO	,
None of heaveners		
Name of Insurance:	Phone #:	
Is there any other information we shou	FI	none #
is there any other information we shou	Id Kilow:	
	IMPORTANT	
I hereby consent that my son/daughter defend, and hold harmless Deco-TEC an against them as a result of ALL the active effort will be made to contact parents of be reached, I hereby give Deco-TEC lead in the event that such treatment is deer give permission to those administering necessary. I release Deco-TEC, Deco-TEC behalf in this regard and rending such mfor any injury resulting from the child's photos, without names, that will be view only being shared with the Deco-TEC Co-Parent's Signature:	and all youth leaders from all officies. Furthermore, in case of guardians of minor child. He ders permission to act on my med necessary or advisable functional treatment to do so, and all medical properties. I also consent to my wable on the Deco-TEC webstemmunity.	claims made and liabilities assessed of emergency, I understand that every dowever, if parent or guardian can't who behalf in seeking medical treatment for the child's health and welfare. I using the measures deemed oviders from liability in acting on my the risk and financial responsibility my son/daughter appearing in group site and to their contact information
Parent's Name:		Date:

TEEN: (PLEASE ANSWER THE FOLLOWING QUESTIONS)

Why have you decided to make a Deco-TEC retreat weekend?

What do you think are the problems facing today's youth?

At the present time, are you experiencing any problems that you can share with us? Please be HONEST!

Registration Fee: \$10.00 – Send with registration form.

<u>Donation for Weekend</u>: \$25.00 – This is payable on Friday night when you register for the weekend. Make checks payable to Northern Michigan Deco-TEC. If the \$25.00 donation is a problem, please register anyway. We would ask that you give what you are financially able.

GOALS OF DECO-TEC: To enable youth to experience the presence of Christ. His presence becomes a living reality as the participants grow into a Christian Community during the weekend.

IN DECO-TEC YOU EXPERIENCE: A fresh atmosphere away from home, church, and school; meeting young men and woman from high schools throughout the area; reflecting and sharing with others on how you see yourself, your ideals, your hopes, and your problems; finding a God you can believe in, and encountering Christ alive today!!

HOW IT HAPPENS: The team of a Deco-TEC weekend is composed of all elements; married and single people, ministers and youth ministers. All portray through their tasks and their presence the living reality of Christ in their lives. The weekend revolves around people and the world we live in, offering small group experiences, liturgy, music and food in a relaxed atmosphere. The growth experience of a Deco-TEC weekend affects and benefits all who participate, team members as well as candidates.

HOW TO REGISTER: Please complete the registration from on this page and send it to the registrar listed below:

Deco-TEC Ministries c/o Amber Povey PO Box 204 Grayling, MI 49735

Phone: (989)-619-4762

Email: nmdecotec2019@gmail.com

(Put Deco-TEC in the subject line)