

# BEAR CREEK COMMUNITY CHURCH 18931 NE 143rd St. Woodinville

www.bccc.org

Pastor Robby Plasencia: robbyp@bccc.org

# **BC3 STUDENT MINISTRY**



# SPRING RETREAT 2025

**May 2-4** 

## **SPRING RETREAT 2025!**

Attention 6-12 graders! It's time again for our annual Spring Retreat at Camp Casey on Whidbey Island.

Come for some awesome games, engaging messages, mission impossible at the fort, good grub, the "Talent/No-Talent Variety Show Extravaganza," the chance to allow God to work in and through you, and more!

Cost is \$240.
This covers all, including a super rad T-shirt.

Meet at Bear Creek Community Church at 4:45pm sharp on Friday, May 2nd with all your gear. We will leave shortly thereafter. We will arrive back at BCCC on Sunday, May 4th around 3:40pm.

#### WHAT TO BRING:

Bible & pen sleeping bag & pillow appropriate clothing (we'll spend time outside) toiletries bath towel

Eat dinner before you come on Friday or pack a non-messy one for the van ride.

Please plan on not using your phone for the weekend.

### -- REGISTER & PAY ONLINE --



Scan this QR code or type in the address, fill out the registration form, & pay online via PayPal. To pay by check, write "Rendezvous retreat" in the memo line and drop in the offering box. For the medical release, sign it, tear it off, and turn it in by drop off on Friday the 2nd.

www.bccc.org/student-ministries/

TO GURANTEE A SHIRT, SIGN UP BY MARCH 14th

### MEDICAL RELEASE

I, the undersigned (parent or legal guardian) understand that in the event medical treatment is required, every effort will be made to contact me. However, if I cannot be reached, I do hereby consent to the administration of any and all medical, dental, and surgical examinations or operations and treatment of all other related care, including the administration of drugs, tests, injections, anesthesia and/or blood transfusions to the above named minor that may be ordered by the physician and/or dentist in attendance at the medical center deemed necessary for emergency treatment. I hereby consent to the release of the medical repor(s) to any doctor or agency and consent to the admission of the above-named minor to the hospital.

I also give permission for Bear Creek Community Church to administer OTC medication to my student, in the case that they are ill or injured. to by administered the following OTC medication:

I have read the above and consent to my child participating in the activities of this event (sports, games, etc.). I also understand that my child is under the authority of the church leadership and that failure to comply with leadership could result in dismissing my child from the function and my being called to come pick him/her up.

Name of Student	
Parent or Guardian	
Legal signature of Parent or Guardian	