



Windy Gap

December 7th-9th

WHO'S GOING? You and 100 of your closest friends! All middle school students in Greater Forsyth County are welcome!

WHERE IS Windy Gap? Located in the mountains of Weaverville, NC right outside of Asheville.

WHAT'S THERE TO DO? Snack bar, fully-stocked game room (with air hockey, foosball, table tennis and more), swimming pool, hot tub, climbing tower, quantum leap, basketball, soccer, the **BEST** WL Clubs ever, music, Frisbee golf, old and new friends, and much, much more...!

COST: Only \$195!

But...turn in a \$50 deposit by November 9th and you will receive \$15 off!!!

An unforgettable weekend for only \$180!!!

TRAVEL INFORMATION: Check-in at 4PM on **FRIDAY, December 7th** by chartered bus from the HANES MALL Parking Lot **OUTSIDE** of Macy's. We will return to the same location on **SUNDAY, December 9th** @ approx. 5 PM. We will call 30 minutes out!

In case of emergency during camp call: 828.645.7187

WHAT TO BRING? Clothes for fall/winter weather, sturdy shoes, bathing suit, **SLEEPING BAG, PILLOW, TOWEL**, toiletries, extra money for two meals (one on the way up and one on the way back), money for the snack bar and camp store if you're interested, around \$30.

younglifefc@bellsouth.net forsythcounty.younglife.org

Windy Gap Registration- Dec. 7th-9th, 2018 (please print): Date _____

Fill out other side & hand to a WyldLife leader or mail with deposit to:
Young Life, 851 West Fifth Street Winston-Salem, NC 27101
For more info, call YL office 336.725.1750

School _____ Grade _____ Sex _____

Name _____

Address _____

City _____ Zip _____

Student Phone _____ T-shirt size (circle): SM MED LG XL

Parent/Guardian Name _____

Parent Email _____ (important, we will be communicating via email)

Parent Phone _____ Parent Phone #2 _____

Payment Information:

Total: **\$195** (*See other side for special offer!*) Make checks payable to: **Young Life**

Online payments use: <https://payments.younglife.org>

Call the YL office for details about a sibling discount, 336.725.1750

Deposit: \$50 Amt paid _____ Check # _____ -or-Cash -or-Online

I understand that deposits are non-refundable after 11/26/18

Balance: \$145 due to YL office by 11/30/18 or \$135 if deposit was paid by 11/9.

Parental Consent Form

Young Life always carries accidental insurance for participants in any Young Life activity. With the increasing sophistication of our medical systems, we are finding it expedient to have parental release forms in the unlikely event of some serious injury requiring medical treatment. This release gives us permission to take your child to the nearest available medical facility and have the necessary treatment administered. Therefore, would you please read the statement in capital letters and add your signature to it. All that this does is give us permission to seek whatever medical attention we deem necessary.

IN CASE OF EMERGENCY, I UNDERSTAND THAT EVERY EFFORT WILL BE MADE TO CONTACT ME. IF I CANNOT BE REACHED, I HEREBY GIVE YOUNG LIFE THE PERMISSION TO ACT ON MY BEHALF IN SEEKING EMERGENCY TREATMENT FOR MY CHILD IN THE EVENT THAT SUCH TREATMENT IS DEEMED NECESSARY. I ABSOLVE YOUNG LIFE FROM LIABILITY IN ACTING ON MY BEHALF IN THIS REGARD SO LONG AS YOUNG LIFE IS NOT GROSSLY NEGLIGENT.

Parent Signature _____

Date: _____

Parent/Guardian's Health Insurance Company _____

Not currently insured

Policy Number _____

Emergency Contact Info: If **Parents** are not available, please call...

(Name): _____

Relationship to student: _____

Telephone Number: _____

Additional Comments (medical history, allergies, diet restrictions)
