2019

Registration Form

3/14/19 – 3/17/19 – Camp Geneva – Holland Michigan

Name: _____

Address: _____

City / State / Zip: _____

Church you attend: _____

E-Mail: _____

Home Phone:_____ Cell Phone: _____

Marital Status: (check one) ____ unmarried _____ married

Roommate Preference (s): _____

Life endangering Food Allergies that need to be accommodated: _____

How did you hear about Unveiled? _____

If you have previously been to Unveiled: ☐ Spring ☐ Fall ☐ None

I am a high school student ☐

Cost of event: (Cabin: $325) (Double Hotel Room $430 per person) (Single Hotel Room $540)

Please complete BOTH PAGES of this form and return BOTH OF THEM with your transferable, non-refundable registration fee to reserve your spot at Unveiled 2019.

Make your checks out to **Unveiled**

Please mail your registration form

and check to:

318 Ministries
1971 East Beltline NE
Suite 106 #123
Grand Rapids, MI 49525

LIABILITY RELEASE / PERMISSION TO PROVIDE MEDICAL CARE

I understand that there may be elements of risk associated with activities that are part of the Unveiled Retreat. I hereby give permission to the physician and/or registered nurse selected by the Unveiled Retreat to give emergency medical or surgical treatment and routine non-surgical medical care as needed. I am voluntarily participating in activities at the Unveiled Retreat and hereby release and agree to indemnify and hold harmless the organizers of the Unveiled Retreat, including its agents and volunteers, from any and all claims of any nature arising from such participation. In signing this document, I hereby certify that the above information is correct and has my full understanding and agreement.

_____

(Signature) (Date)

_____ _____

(Printed Name) (Date)

PHOTO RELEASE

I hereby grant the organizers of the Unveiled Retreat permission to use my likeness in a photograph in any and all of its publications, including website entries, without payment or any other consideration. I understand and agree that these materials will become the property of the organizers of the Unveiled Retreat and will not be returned.

I am 18 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

_____

(Signature) (Date)

_____ _____

(Printed Name) (Date)