## Indian Christian Fellowship Retreat 2011 Registration Form

# “NEVER THIRST AGAIN”

John 4:13-14

*“Jesus answered, “Everyone who drinks this water will be thirsty again, but whoever drinks the water I give them will never thirst. Indeed, the water I give them will become in them a spring of water welling up to eternal life.”*

**When**: Friday, March 25-Sunday, March 27, 2011

**Where**: Camp of the Woods- Speculator, NY

**Cost**: SUNY, RPI, Siena, Union, St. Rose, AMC, Sage, ACP: $50\*\*

Students from other schools: $70

Visitors and Guests: $94

This cost includes 2 nights stay, 5 meals and transportation.

\*\*The original price of each room is $94. Through generous alumni contributions, ICF has been able to subsidize $44 for students in the capital district, and $24 for students elsewhere. If you wish, we leave forth the option of contributing more than the minimum contribution of $50 if you so desire.

† Please make all checks payable to: Indian Christian Fellowship †

For any questions or concerns please feel free to contact us at:

Email: Albany.icfny@gmail.com

Phone*: (914)512-1582 (Prince) / (845-300-4052) (Stanley)*

Indian Christian Fellowship • 1400 Washington Ave State Quad MB#6500 • Albany, NY 12222

[www.icfny.weebly.com](http://www.google.com/url?q=http%3A%2F%2Fwww.icfny.weebly.com&sa=D&sntz=1&usg=AFQjCNEngJz8RoTR_L9sSjCmwM-xlRjqlw)

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**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**School:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**T-shirt size**: small | medium | large | x-large | xx-large

**Will you be able to drive?** : Yes / No

**Payment Type**: Check / Cash

*I understand that Indian Christian Fellowship is an uninsured organization and have agreed to accept charges for any damage I have caused deliberately or by accident. I have also read the rules and regulations as stated in the Camp of the Woods contract and pledge to abide fully.*

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CAMP-of-the-WOODS**

**FACILITIES (including Climbing Wall, Skating Rink and Tubing Hill)**

# ACKNOWLEDGEMENT OF RISK, WAIVER OF LIABILITY, AND RELEASE OF LIABILITY

I HEREBY UNDERSTAND, ACKNOWLEDGE, AND AGREE AS FOLLOWS:

**Initial** in boxes below

 for each item

1. THAT CLIMBING, ICE SKATING, AND SNOW TUBING ARE INHERENTLY HAZARDOUS AND DANGEROUS ACTIVITIES THAT CAN RESULT IN HARM, LOSS, DAMAGE, PERSONAL INJURIES, OR DEATH.
2. That events and activities related to, associated with, or connected with climbing, snow tubing or ice skating CAN ALSO EXPOSE ME TO HAZARDS AND RISKS, BOTH NATURAL, AND ARTIFICIAL, THAT MAY RESULT IN HARM, LOSS, DAMAGE, PERSONAL INJURIES
3. That my use of CAMP-of-the-WOODS facilities, equipment, or apparatus is entirely voluntarily and with a complete and full understanding that any and all such usage, including, but not limited to climbing, snow tubing and ice skating, is entirely voluntarily and with a complete and full understanding that any and all such usage involves hazards and dangers that can result in harm, loss, damage, personal injuries, and death and that I ASSUME ALL RISKS AND RESPONSIBILITY FOR ANY HARM, LOSS, DAMAGE, PERSONAL INJURY, OR DEATH RESULTING FROM, ARISING OUT OF, OR IN CONNECTIONS WITH ANY AND ALL SUCH USAGE.
4. THAT I WILL OBEY AND COMPLY WITH ALL RULES, REGULATIONS, OR INSTRUCTIONS OF CAMP-OF-THE-WOODS FACILITIES OR ITS EMPLOYEES OR AGENTS, and that I have a responsibility to ask questions and clarify any rules, regulations, or instructions if I do not understand, fully comprehend, or have any doubts about any rule, regulation, or instruction.
5. That I have an obligation and responsibility to myself, as well as to other users of CAMP-of-the-WOODS facilities, equipment, or apparatus to avoid use while under the influence of drugs or alcohol or while suffering from or experiencing any condition that might impair me.
6. Any equipment, gear, or apparel that I may use or receive from CAMP-of-the-WOODS, I USE AT MY OWN RISK AND IT IS EXPRESSLY UNDERSTOOD, ACKNOWLEDGED, AND AGREED THAT CAMP-OF-THE-WOODS FACILITIES, ITS OFFICERS, DIRECTORS, EMPLOYEES, AND/OR AGENTS SHALL NOT BE LIABLE FOR ANY HARM, LOSS, DAMAGE, PERSONAL INJURY, OR DEATH RESULTING FROM THE USE OF SUCH FACILITIES, EQUIPMENT, GEAR, OR APPAREL.
7. That in consideration of being permitted to use CAMP-of-the-WOODS facilities, equipment, and/or apparatus, for myself and on behalf of my heirs, personal representatives and assigns, I HEREBY WAIVE , RELEASE, AND DISCHARGE FOREVER, GOSPEL VOLUNTEERS, INC., CAMP-OF-THE-WOODS, ITS OFFICES, DIRECTORS, EMPLOYEES, AGENTS FROM ANY AND ALL LIABILITIES, CLAIMS, DEMANDS, OR CAUSES OF ACTION WHATSOEVER FOR ANY HARM, LOSS, DAMAGE, PERSONAL INJUIES, OR DEATH, DUE TO NEGLIGENCE OR ANY OTHER CAUSE, RESULTING FROM, ARISING OUT OF, OR IN CONNECTIONS WITH MY USE OF THE HIGH ADVENTURE COURSE, TUBING HILL, ICE SKATING RINK AND CLIMBING WALL, ITS FACILITIES, EQUIPMENT, OR APPARATUS.
8. I REPRESENT AND ACKNOWLEDGE THAT I HAVE FULLY READ THIS ACKNOWLEDGEMENT OF RISK, WAIVER OF LIABILITY, AND RELEASE OF LIABILITY AND FULLY UNDERSTAND EACH AND EVERY PROVISION AND THAT I AM VOLUNTARILY EXECUTING THIS AGREEMENT.

Name of Person Attending (Please Print)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If under 18, signature of a parent or legal guardian, affixed in the presence of a CAMP-of-the-WOODS employee; indicated name and relationship:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

**Office Use:** Dated \_\_\_/\_\_\_\_/\_\_\_\_ Authorization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctrinal Statement:

* We believe in the DIVINE AUTHORITY of the Bible alone

# We believe in ONE GOD, eternally existing in three persons; Father, Son and Holy Spirit

## We believe in the DEITY & HUMANITY of JESUS CHRIST in one Person

# We believe that ALL mankind is LOST eternally without JESUS CHRIST

* We believe in the SUBSTITUTIONARY ATONEMENT as well as the BODILY RESURRECTION and ASCENSION into Heaven of JESUS CHRIST
* We believe that the ONLY way to Heaven is by FAITH through JESUS CHRIST alone
* We believe in the PHYSICAL RETURN of JESUS CHRIST

Mission Statement:

The Mission of Gospel Volunteers Inc. is to present the Biblical truths of Jesus Christ, develop Christian Leadership, strengthen the faith of individuals and families and promote global evangelism.

Protection Clause:

CAMP-of-the-WOODS is not responsible for, nor does it offer, supervision for attendees of a group at any time whether on or off CAMP-of-the-WOODS property while attending CAMP-of-the-WOODS. Group leaders are fully and solely responsible for the supervision of their group attendees. In the event of an accident on or off CAMP-of-the-WOODS property while attending CAMP-of-the-WOODS, CAMP-of-the-WOODS will not be held responsible or liable.

Rules and Regulations:

Meals: Times - Breakfast: 8:00 a.m. / Lunch: 12:30 p.m. / Dinner: 6:00 p.m. Please honor meal times. Arrive promptly to the Dining Hall so that everyone can be served in a timely manner. Please do NOT take any food or utensils out of the dining room. Your group is to clear your tables at the end of each meal.

Bedding: Each Purdy Center room contains two double beds and a mattress. Linens, blanket and pillow are provided for the mattress. 22 of the 23 rooms in Zeitfuss Lodge contain two bunk beds and a mattress for a total of 5 beds. Linens, blanket and pillow are provided for the mattress. The 23rd room contains two twin beds and a mattress.

Fire/Medical Emergency: In the event of an emergency, contact the Front Desk for immediate assistance. If no one is available, emergency numbers are posted above the phone located by the Front Desk and above the red emergency phones located in Zeitfuss Lodge. If needed, ambulance service is available for transport. The nearest hospital is located in Gloversville, 45 minutes away. The group leader is responsible to provide a First Aid Kit for group members.

Front Desk: The Front Desk and switchboard are open from 7:30 a.m. to 12:00 midnight. Dial “0” from any CAMP telephone to contact the Front Desk. The CAMP-of-the-WOODS telephone number is 518-548-4311.

Pay Phones: Located in the Purdy Center lower level Social Hall and Zeitfuss Lodge ground floor.

Smoking & Alcohol: Smoking not permitted in buildings. Alcohol is NOT allowed on the grounds!

Gymnasiums: No skates of any kind, skateboards, food or drinks allowed in gymnasiums. Athletic shoes with non-marking soles must be worn in gymnasiums at all times. If group attendees have two pairs of shoes, please carry gym shoes and put them on when you arrive at the gym. This is a big help to keep the gyms clean. Lights out at 11:45 p.m.

Swimming Pool: No Lifeguard on duty! Everyone that enters the Pool Room MUST sign in and out at the Front Desk. No street clothes are allowed in the pool. Food or drinks are NOT permitted in the pool area. Group leader must provide two experienced swimmers, age 21 or older, in the Pool Room; one of whom must be on the pool deck supervising whenever members of your group are using the pool. It is the group’s responsibility to never have less than three people in the Pool Room.

Fire: Burning of incense, candles, etc. is prohibited on CAMP grounds.

Damage to Rooms & Camp Property: Group leader is responsible for damages incurred during the group’s stay at CAMP. All damages to rooms or facilities will be added to the group bill.

Tipping: We greatly appreciate your generosity, which is added to the salaries of those working in the Dining Hall and Housekeeping. A $1.00 tip per person in your party per day is a suggested amount.

Lost & Found: All lost and found items collected by CAMP from your group’s conference or retreat will be collected and stored at CAMP. It is group’s responsibility to call and notify CAMP to retrieve lost item if it is found.

Checking Out: Before checking out of rooms, turn all lights off, turn down temperature and close windows. Leave door open and return room keys to the Front Desk. Lost keys will result in a $10.00 per key fee.

I have read and agree with the Doctrinal and Mission Statements and will abide by the Rules and Regulations of GOSPEL VOLUNTEERS, INC., owners and operators of CAMP-of-the-WOODS.