

mpe student ministries present

Ice Fest

2010

812's
Jan. 15th-17th
67's
Feb. 5th-6th
Leaven-

detach here

name _____

city _____

wa zip _____

phone () _____

email _____

age _____
grade _____

address _____

Registration Information

Parent Section

I agree to all the rules & requirements given by the retreat staff. I understand if my child fails to follow the instructions or directions of the retreat staff or acts in a manner deemed unsafe by such, I will be required to immediately pick him/her up.

Student Section

I agree to all the rules & requirements given by the retreat staff. I understand if I fail to follow the instructions or directions of the retreat staff or act in a manner deemed unsafe by such, my parent or guardian will be required to immediately pick me up. With No Refund.

Retreats: 812's (8th -12th) \$150.00
(Check One) 67's (6th and 7th) \$100.00

Check # _____ Amount _____

Cash amount _____

Parent Permission Slip turned in:

812's (8th - 12th) Leavenworth Wa. January - 15th - 17th
67's (6th - 7th) Leavenworth Wa. Febuary - 5th-6th

When payment is received reservation confirmation and detailed trip

Any questions:

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