



Just the Facts:

Retreat Cost: Only \$50

Depart: Friday, 6pm
(eat dinner before you arrive)

Return: Saturday, 6pm

Emergency Numbers:

717-687-8564 (Christiana Tsai Retreat Center)

545-703-4410 (Mike's Mobile Phone)

Contact Us:

Mike Yurik

Youth Pastor

302-764-8615 ext. 105

faithwilmington.com/youth



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www.faithwilmington.com/youth
[Facebook.com/FaithYouthMinistries](https://www.facebook.com/FaithYouthMinistries)

HIDEAWAY

2016 SPRING RETREAT

MAY 20-21

 **FAITHYOUTH**
STUDENT MINISTRIES
faithwilmington.com/youth



HIDEAWAY is our Spring Retreat. It's an annual tradition here at Faith. It's time to get away and recharge your spiritual batteries and have some fun.

Where is it?

The retreat will be at the Christiana Tsai Retreat Center in Paradise, PA.
21 Ambassador Dr
Paradise, PA 17562
717-687-8564

What will we be doing?

We'll spend some time looking at God Word and worshipping together. We'll also have tons of other activities and games that we will be participating in! You don't want to miss it. It will be a very relaxed atmosphere and a great time to build new relationships, strengthen existing ones, and grow closer to God.

When are we leaving and coming back?

We will leave the church Friday at 6pm (eat before you come) and returning Saturday at 6pm.

What do I need to bring?

- ◆ Clothes to play around outside (including long pants and long sleeves for outside games and poison ivy blocker if you're allergic)
- ◆ Sleeping bag
- ◆ Pillow
- ◆ Towel
- ◆ Toiletries
- ◆ Sunblock
- ◆ Bible
- ◆ Pen or pencil

No Cell Phones

Since a large reason for our retreat is to get away from our regular routines and connect with each other and God, we ask that you stay off your cell phones for the entire weekend. If you are seen using your phone without the permission of a leader it will be taken away and returned once we get back.

What's the cost?

Only \$50—*Due by Sunday, May 15th*

If you have questions about Faith Presbyterian Church's youth ministry, you can contact Mike Yurik (302) 764-8615.

RETREAT REGISTRATION

We, the undersigned parents/guardians, hereby authorize our son/daughter,

_____ to attend the Hideaway Retreat at Christiana Tsai Retreat Center in Paradise, PA. on the dates specified. In the event of an emergency, we understand that all will be done to contact us. However, if we cannot be reached, we give permission to the physician selected by the youth staff to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for our child. Therefore, we release Faith Presbyterian Church and agents or employees thereof from any claim we may have as a result of our child being injured on the said weekend.

Student's Name Retreat Dates

Parent/Guardian Signature Date

Address

City State Zip

Phone Number Email

Work/Mobile # (for emergency)

Age Grade

If coming with a friend, give his/her name