**The 10 Commandments**

**IDE Confirmation Retreat**

October 7-8, 2016

Camp Io-Dis-E-Ca
3271 Sandy Beach Rd NE
Solon, IA 52333

The Two Tables of the Law

We will go through what the Ten Commandments actually say and split them into two tables. 1. Love the Lord your God with all your heart, soul, and mind. The first commandment is the foundation of all Ten Commandments. The final nine go into detail on how we should fear, love, and trust in God above all things. The first three commandments teach us specifically how to fear, love, and trust in God. 2. Love your neighbor as yourself. This commandment summarizes the final seven commandments. God loves his creation, so we love one another. Christ did not come to be served, but to serve, so we too serve one another. The Fourth Commandment sets the stage for the second table of the law.

The Uses/Functions of the Law

We know what the Law is. But do we know why? We will learn how the Law curbs, shows us our sin, and guides us. The chief function of the Law is to show us our sin and need for a Savior.

The Promises of the Law Verses the Promises of the Gospel

The Law does show that God is good, but the promises are conditional. The Gospel shows that God is good, but it frees us from the conditions of the Law.

Rev. James Preus, pastor of Trinity Lutheran Church in Ottumwa, will be teaching the youth about 10 Commandments during the 2016 Confirmation Retreat.

The retreat will take place beginning on Friday, October 7th at 7pm and going through 3 pm on Saturday. This retreat includes dinner on Friday and breakfast and lunch on Saturday. A complete schedule can be found on the next page.

This year we are again offering online registration for all youth events. Visit [http://lcmside.org/2016-confirmation-retreat](http://lcmside.org/2016-confirmation-retreat) for more information and to register online.

The registration deadline for this event is **Friday September 30th**.

The cost of the confirmation retreat is **$45**. Please fill out the online registration form and pay online or make checks payable to “Iowa District East.” On the memo line write “2016 Confirmation Retreat.”

If you have any questions or would like more information please contact the District Office at 319-373-2112 or email jon@lcmside.org.

In Christ,

Jon Kohlmeier
jon@lcmside.org
Comm./Technology Coordinator
Iowa District East – LCMS
The 10 Commandments
IDE Confirmation Retreat

Schedule

Friday, October 7th

7:00-8:00 pm  Arrive and Register
8:00-8:30 pm  Opening Worship
8:30-8:55 pm  Pizza (Alpha Dining)
8:55-9:15 pm  Icebreakers
9:15-10:00 pm Relays (Basketball Court)
10:00-10:45 pm Session 1
10:45-11:00 pm Evening Devotion
11:00-11:30 pm S’mores/Free Time/Get Ready for Bed
11:30 pm      Lights Out

Saturday, October 8th

8:00-8:45 am  Breakfast and Table Talk
8:45-9:00 am  Morning Devotion
9:00-9:45 am  Session 2
9:45-10:45 am Game
10:45-11:00 am Break
11:00-11:45 am Session 3
11:45-12:00 pm Break
12:00-1:00 pm Lunch (Alpha Lodge Dining)
1:00-2:00 pm  Pack Up Room
2:00-2:45 pm  Servant Event
2:45 pm       Topic Review & Closing Devotion
               Depart
Iowa District East Youth Event Health Form/Release

First Name ___________________________ Last Name ___________________________
Gender ___________________________ Birthday ___________________________ Age ___________________________ Grade ___________________________
Address ___________________________ City ___________________________ Zip ___________________________
Parent Names ___________________________ Cell ___________________________ Work ___________________________

If not available in an emergency, notify:

Name ___________________________ Relationship ___________________________ Phone ___________________________ Cell ___________________________
Doctor ___________________________ Phone ___________________________
Dentist ___________________________ Phone ___________________________
Pharmacy ___________________________ Phone ___________________________

Name of Family Medical/Hospital Insurance:

Insurance Carrier ___________________________ Policy # ___________________________
Insurance Phone # (if applicable) ___________________________ Primary Insured’s Name ___________________________
Activity Restrictions by parent’s/physician’s advice: ___________________________
Other information: ___________________________

Allergies:

Hay ________ Fever ________ Poison ________ Ivy ________ Insect Stings ________ Asthma ________ Foods ________
Peanut ________ Butter ________ Nuts ________ Penicillin ________ Drugs ________

Medications brought to event ___________________________ Notes on giving ___________________________

Acetaminophen, Ibuprofen, antacids, anti-diarrhea medication and first aid MAY / MAY NOT (circle one) be administered to my child, as needed, by designated chaperones.

Special Considerations? ___________________________

Authorizations / Release:
This health history is correct so far as I know and the person herein described has permission to engage in all prescribed event activities except as noted above. I also give permission to the event coordinator or chaperone to order x-rays, routine tests and treatment. In the event I cannot be reached in an emergency, I give permission to the physician selected by the event coordinator to transport, hospitalize and secure proper treatment, order injection and/or anesthesia and/or surgery.

Signature of Parent/Guardian ___________________________ Date ___________________________
# IDE Youth Event

**Online Registration Planning Sheet**

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