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## IDE Middle School Retreat & Snowlympics January 31-February 1, 2020

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*Each one of us has our own unique taste of what we enjoy, some like Country music, others prefer Rock or Rap music. But let us not forget Classical music, Jazz, Blues, Hip Hop or Christian music. At the 2020 IDE Middle School Retreat, our youth will study God's gift of music with Pastor Ferch. Together, we will look back to the Old Testament and learn how music was involved in the life of the church. We will peer back into history to see how the early church used music in the Divine Service and how that applies to the church today. We'll also answer an equally important question of, "How does Satan influence our youth with music?" Pastor Ferch will have samples of popular songs that today's teens listen to and together as we parse the words of the song. Through the work of the Holy Spirit, our youth will recognize the influence of Satan through all genres of music.*

### Registration

**\$50** per student

Register online through [EventBrite](#), or send your completed order form with a check for \$45 to the district office:

IOWA DISTRICT EAST - LCMS  
1100 BLAIRS FERRY RD  
MARION IA 52302-3039

### Forms

All student will need to bring a completed [Health & Photo Release](#) form with them to camp. This can be found on our district website, along with a [packing list](#), at [lcmside.org](http://lcmside.org)

### Questions

Visit our district website online for information about the event, or contact the district office: [dsanchez@lcmside.org](mailto:dsanchez@lcmside.org) / (319) 373-2112.



## REGISTRATION FORM

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ AGE \_\_\_\_\_ GENDER: M / F

REGISTRATION TYPE (circle): Youth / Adult Chaperone

Send a check for **\$50** with this form to the District Office:

IOWA DISTRICT EAST  
1100 BLAIRS FERRY RD  
MARION IA 52302-3039

Students will need to fill out a camp Health and Photo Release Form. Bring this with you to camp. The form can be found on our district website at [lcmiside.org](http://lcmiside.org).

Contact the District Office for more information:  
[dsanchez@lcmiside.org](mailto:dsanchez@lcmiside.org) or call 319-373-2112.



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# IDE Youth Event

## Online Registration Planning Sheet

Name	Email	Home Phone	Cell Phone	Gender	Age	Church / City	Registrant Type
				M F			<input type="radio"/> Adult <input type="radio"/> Youth
				M F			<input type="radio"/> Adult <input type="radio"/> Youth
				M F			<input type="radio"/> Adult <input type="radio"/> Youth
				M F			<input type="radio"/> Adult <input type="radio"/> Youth
				M F			<input type="radio"/> Adult <input type="radio"/> Youth
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				M F			<input type="radio"/> Adult <input type="radio"/> Youth
				M F			<input type="radio"/> Adult <input type="radio"/> Youth

Visit this event at [EVENTBRITE](#).

If you have questions please contact Daniel Sanchez at [dsanchez@lcmiside.org](mailto:dsanchez@lcmiside.org) or 319-373-2112.



This information is confidential. Youth leader needs to collect and bring this form along for each IDE youth event.

## Iowa District East Youth Event Health Form and Photo Release

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Gender \_\_\_\_\_ Birthday \_\_\_ / \_\_\_ / \_\_\_ Age \_\_\_\_\_ Grade this Fall \_\_\_\_\_  
Address \_\_\_\_\_ Information Provided By: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_  
Parent 1 First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_  
Parent 2 First Name \_\_\_\_\_ Last Name \_\_\_\_\_ 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 we need to know? \_\_\_\_\_

ALLERGIES:  Hay Fever  Poison Ivy  Insect Stings  Asthma  Food(s): \_\_\_\_\_  
 Peanut Butter  Nuts  Penicillin  Other 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 AND PHOTO 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.

I grant to Iowa District East the right to take photographs of me and my family in connection with the Iowa District East youth events and retreats. I authorize Iowa District East, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Iowa District East may use such photographs of me and my family with or without my name and for any lawful purpose, including, for example, such purposes as publicity, illustration, advertising, and Web content. I agree that if I have any concerns or questions regarding the use of such photographs I should contact the Iowa District East office, in writing, in a timely manner.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

THIS FORM MUST BE COMPLETED, SIGNED AND GIVEN TO YOUR YOUTH COUNSELOR ATTENDING THE EVENT WITH YOU. THE YOUTH COUNSELOR COLLECTS AND RETAINS THE IDE YOUTH EVENT HEALTH FORM FOR EACH PARTICIPANT. DO NOT SEND THIS FORM TO THE DISTRICT OFFICE.

## *What should I bring to Camp?*

Bible

Sleeping Bag

Pillow

Appropriate clothing and shoes for activities

## *DO NOT BRING*

Irreplaceable or valuable items

Cell Phones

iPods, mp3 players, etc.

Extra money

Nuisance items that distract from the purpose of the event

**\*You are responsible for any items you bring to camp\***

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