



**PRETEEN RETREAT**  
**HEARTBEAT**  
**2019**

North Arkansas District

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**SEPTEMBER 13 - 15**

FOR 4TH, 5TH & 6TH GRADE STUDENTS

**SOTO CAMP & RETREAT CENTER**

1343 Shepherd Lane  
County Road 139  
Harriet, AR 72639

# RETREAT RATES

## **Early Bird Rate: \$115**

All steps completed by Friday, August 2nd

## **Regular Rate: \$135**

All steps completed by Friday, August 16th



# REGISTRATION PROCESS

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## **Step 1: Register Online**

**[CLICK HERE TO REGISTER](#)**

## **Step 2: Print/Fill Out Forms**

Print and fill out the attached forms, ensuring that they are signed, and you've attached a copy of your insurance card.

Lastly, make sure you give them to your church's preteen retreat coordinator once they are complete. The church will mail the completed forms.

## **Step 3: Payment**

Please make payment to your local church. Your local church will then send one check.

# WHAT TO BRING

Casual Clothing  
Modest Swim Wear  
Swim Towel  
White T-Shirt (for Color War)  
Extra Change of Clothes our Color War  
Extra Sneakers or Water Shoes for the Creek  
Closed-Toe/Heel Shoes for Activities  
Sweatshirt  
Toiletries (Soap, Shampoo, Toothpaste,  
Deodorant, etc.)

**All Bedding and Bath Towels are Provided**

Reusable Water Bottle  
Flashlight  
Insect/Tick Repellent, Sunscreen  
Hammock  
Bible/ Journal  
2 Garbage Bags (for dirty/wet clothes)

# MEDICATION

All medication will be turned into the nurse upon arrival.

All medication should be placed in a clear plastic baggie in the original packaging with the exact dosage needed. Include the following: First & last name, church name and medication instructions.

# DEVICE FREE ZONE

Please do not send any electronic devices to retreat. If a preteen arrives at retreat with a device, they will be asked to check it in with their counselor at the beginning of the weekend. This is an opportunity for us to give students a device free weekend where they can focus on hearing from Jesus Christ and building relationships.



## 2019 THEME & SPEAKER



Trey & Candice love EVERY part of camps and retreats...food, fun, friends and especially the time to connect with Jesus. They are very excited to be at retreat with us!



## QUESTIONS?

Pastor Diane Solberg @ [dsolberg@bnaz.org](mailto:dsolberg@bnaz.org)

Pastor Elizabeth Karlowski @ [elizabethkarlowski@gmail.com](mailto:elizabethkarlowski@gmail.com)

Pastor Kris Adams @ [kadams@rogersfirst.com](mailto:kadams@rogersfirst.com)

# Medical Information and Release Form

## Student Information

Student's Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

School: \_\_\_\_\_ Date Of Last Tetanus Shot: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

In case of emergency call:

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

## Medical Insurance Information

Allergies, medicines, or medical information that needs to be known about the student:

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

Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Insured Parent Name: \_\_\_\_\_ Insured Parent Employer: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Insurance Company Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Insurance Company Phone: \_\_\_\_\_

**Please Attach Copy of Insurance Card**

I understand that in the event of a medical emergency every effort will be made to contact the parent or guardian listed above. However, in the event that the named parent or guardian cannot be reached, I hereby authorize the camp staff, church minister(s), sponsors, present on such trip, activity or event to select such physicians, nurses, medical authorities, and/or hospitals to administer proper treatment for my child and/or to order and administer to him/her such injection, medication, anesthesia, surgery, hospitalization, or such other medical practices as they deem necessary.

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Consent and Liability Release

I, \_\_\_\_\_, hereby acknowledge that it is my desire (for my child) to participate in church-sponsored activities with (church's name) \_\_\_\_\_ and North Arkansas Church of the Nazarene District including activities on and/or away from the church premises as well as transportation to and from such activities.

My child is voluntarily participating in these activities, including transportation to and from such activities, with knowledge of dangers involved and hereby agree to accept any and all risks of injury as a result of such participation and transportation.

As lawful consideration for permitting my child to participate in such activities, including the transportation to and from such activities, I hereby release and discharge (church's name) \_\_\_\_\_ and North Arkansas Church of the Nazarene District, its officers, employees, agents and members of the Church Board from all actions, claims or demands resulting from the negligence or other acts, howsoever caused, by such church, officers, employees, agents and Church Board, before or during my child's participation in such church sponsored activities on and or away from the church premises, including transportation to and from such activities.

## Student Transportation

I, \_\_\_\_\_, approve of and authorize the transporting of, my child \_\_\_\_\_

\_\_\_\_\_, to and from church sponsored events in a private vehicle or church bus/van. I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and an assumption of risks and sign it of my own free will.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

## Conduct & Consequences

All students will be expected to be obedient to all Ministry Leaders and Volunteers at all times within reason. Also, students will be expected to adhere to the law at all times. No student will be allowed to put themselves or others in danger at any time. Offences will have consequences corresponding in severity and shall be determined by the youth staff on location. No physical discipline will be used unless in effort to restrain physical misconduct. Consequences may include, but are not limited to, verbal reprimand, loss of privileges while on trip, or being sent home. Should a student be sent home it will be at their own expense. Parents, and the student, will be expected to immediately reimburse the church for expense incurred in sending a student home. If a student is sent home, they will not be refunded their fees for an event.

I, \_\_\_\_\_ the parent/guardian of \_\_\_\_\_ understand and accept the above policy of conduct and consequences. By signing I agree that my student will be subject to these policies and empower the Ministry Staff of (church's name) \_\_\_\_\_ and North Arkansas District Church of the Nazarene to act as it is appropriate in regards to my child.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Student Signature



## RELEASE AND INDEMNIFICATION AGREEMENT

To be read and signed by each guest/visitor. Parents must sign for anyone under 18.

Shepherd of the Ozarks is located in the heart of the Ozarks and includes over 460 acres of beautiful woods and streams, waterfalls and caves, bluffs, ponds, natural springs and rolling open spaces. Any of the activities that can sometimes take place at Shepherd of the Ozarks, such as swimming, tubing/floating, fishing, canoeing, hiking or walking, backpacking, exploring caves, picnicking, sightseeing, visiting the petting zoo, horseback riding or petting the horses, Ropes Challenge Courses, Rock Climbing/Rappelling, Paintball, use of personal vehicles and occupying the cabins/lodges offer the possibility for personal injury or accidents for which all visitors must assume responsibility.

Below is a list of a few of the dangers, but in no way includes all of them.

For example, the water is very inviting, but drowning could occur. The creek can flood during hard rains. The bluffs are beautiful, but are deadly if someone should fall from them. Wildlife abounds and is interesting to watch, but animals can bite, skunks can spray, rattlesnakes and other poisonous snakes can be dangerous. The more domestic animals such as horses, goats, petting zoo animals, etc., seem tame but can be dangerous. Individuals can be harmed by falling from the stairs and high decks around the cabins. Ticks can carry Rocky Mountain Spotted Fever or other diseases. All ticks should be removed daily from one's body. Mosquitoes can carry West Nile Virus and other diseases. Roads on the property are gravel and rough, requiring slow and careful driving. Horseback riding can be hazardous and result in death or serious injury because horses can be unpredictable in their behavior, even with the most experienced of riders. Helmets are provided and recommended. Also, four-wheeler riding (if available) can be hazardous and can result in death or serious injury.

All visitors assume full responsibility for their safety in the above-mentioned dangers as well as the many dangers not specifically noted. Shepherd of the Ozarks carries no accident or health insurance on guests and visitors and accepts no responsibility or liability.

In connection with the lease of the property from Shepherd of the Ozarks, SOTO Ministries, Pinnacle Acquisitions, James L. and/or Michelle A. Miller, Mahala A. Miller and co-lessor(s) described therein, I hereby agree and covenant as follows, in consideration of the lease and the promises therein, the receipt and adequacy of which I hereby acknowledge:

1. Hereby to release and discharge lessors jointly and severally from, and to waive any and all causes of action, suits, claims, demands, rights, actions, judgments, and executions (including all damage and torts) in connection with said lease, the property, and the activities.
2. Hereby to indemnify, hold harmless and defend lessors from any and all causes of action, suits, claims, demands and torts, rights, actions, judgments, and executions (including all damage and torts) in connection with said lease, the property, and the activities, if brought by any lessee that I permit on the property during my lease or their legal representatives, spouses, heirs, or estates.
3. Hereby to covenant never to institute any suit or action at law or equity, not institute, prosecute, or in any way aid in the institution thereof, for damage, against any or all of the lessors in connection with said lease, the property and the activities. I hereby agree that this instrument may be treated as a defense to any lessees or in their behalf against lessors jointly and severally, and shall forever be a complete bar to the commencement and prosecution of any such or proceeding whatever, on account of damage to lessees.
4. Not to permit any guest to enter the property, or engage in the activities unless such guest has signed this release. I hereby acknowledge that NO PERSON HAS MADE ANY



WARRANTY, WHETHER EXPRESS, IMPLIED OR OTHERWISE WITH RESPECT TO THE SUBJECT PROPERTY OR ACTIVITIES, OR ANY OTHER REPRESENTATION WITH RESPECT THERETO. I HEREBY ACKNOWLEDGE THAT THE ACTIVITIES ARE INHERENTLY HAZARDOUS ACTIVITIES, AND THAT I AM ASSUMING ALL RISK VOLUNTARILY IN CONNECTION WITH THE PROPERTY AND THE ACTIVITIES.

5. As used herein, "lessors" shall mean Shepherd of the Ozarks, SOTO Ministries, Pinnacle Acquisitions, James L. and/or Michelle A. Miller, Mahala A. Miller and any co- lessor(s), the spouses thereof, the legal representatives and the businesses thereof;; "activities" shall mean any and all use by vehicles, of the buildings, and all other activities in connection therewith;; "lessee" shall mean the undersigned, the spouse thereof, the children thereof whether minor or adult, the invitees, and other guests thereof whether minor or adult, and other users in connection therewith;; "damage" shall mean any past, present, or future damage, costs, compensation, or loss of services for or on account of, any damage, loss, injury or death, to person or property or both, past, present or future.
6. This release may be amended only in writing signed by the undersigned parties. It binds and benefits the heirs and estates of the parties, but may not be assigned. It is governed by Arkansas law. Its terms are severable. Its rights and remedies are not waived by exercising any oral statements. It is effective as soon as the release is signed by Lessee and /or when Lessee first enters the property whichever occurs first and supersedes any oral statements. Lessee executes this release on behalf of itself and on behalf of its minor children (whether or not adopted) as legal guardian and next of kin.

**NO PETS, ATVS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS, SMOKING, OR WEAPONS OF ANY KIND INCLUDING PAINTBALL MARKERS ARE ALLOWED ON SHEPHERD OF THE OZARKS PROPERTY.**

***Note: All guests/visitors must sign this release prior to occupying cabins or lodges or engaging in any activities. Parents or legal guardians must also list children under eighteen years of age.***

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Signature of Guest/visitor (Lessee)

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Date

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Signature of Parent or Legal Guardian (If guest/visitor is under age 18) Date

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Please Print First and Last Name As Signed Above

**Please list Children under eighteen years of age below:**