

# MIX OVERNIGHT | MIDDLE SCHOOL

## WHAT TO EXPECT?

An overnight experience that will launch middle schoolers into an explosive time of games, activities, and a dose of Jesus.

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### WHEN?

Friday, May 3 - Saturday, May 4

### WHERE?

Miracle Bible Camp | Hackensack, MN

### COST?

FREE

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## How do I sign up?

To sign up, simply fill out and hand in the registration & waiver form by

Wednesday, April 24

*\*An "Early-Out" form is included to provide your schools with a reason for getting your teenager out of school early.*



## Important:

- **NO phones** for the overnight. It's such a short time, and it will set up the teens to be fully present and engage in conversations. If you need to reach your child please feel free to reach out to me (texting is the best).
- I (Pastor Joe Reigstad) will be one of the adults at the retreat. If you need to reach me for any reason, you can do so by calling or texting me at 641-230-3912.
- **NO Weapons, Drugs, Alcohol, Tobacco products, or any type of paraphernalia** are allowed. If any are found, they will be confiscated.

*If your student has medications to take throughout the weekend, they must be checked in with me on Friday upon arrival at the church*

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**Drop off FRIDAY at Lincoln Efree Church at 1:30 pm**  
**Pick up SATURDAY at Lincoln Efree Church at 1:00 pm**

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## PACKING LIST

### **Make sure you bring...**

- Bible
- Pen/Pencil
- Notebook
- Weather-appropriate and modest clothing
- Jacket/gloves
- Pajamas
- Tennis shoes
- Toiletries (toothbrush & paste, hair stuff, shower stuff, towel, and DEODORANT)
- Flashlight
- Pillow
- Sheet and Blankets (or sleeping bag)
- Slippers and/or easy on/off shoes to wear in the cabin
- Water bottle

### **Optional:**

- Backpack (makes it easier to carry things to shower room and/or to chapel)
- Extra weather-appropriate gear (it may be chilly, raining, who knows)
- Snacks (if you bring snacks, must be in a sealed container)
- An extra pair of pants and socks!!!



# MIX OVERNIGHT RELEASE FORM

NAME Last: \_\_\_\_\_ First \_\_\_\_\_

Grade: \_\_\_\_\_ Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male [ ] Female [ ]

Name of Parents/Guardians:

Father: \_\_\_\_\_ Mother: \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_ State \_\_\_\_\_

Phone ( ) \_\_\_\_\_

Church you attend: \_\_\_\_\_

Emergency Contact Other than Parent:

Name \_\_\_\_\_

Relationship to student \_\_\_\_\_ Phone # \_\_\_\_\_

## HEALTH HISTORY

Family doctor \_\_\_\_\_

Health Insurance Co. \_\_\_\_\_

Policy # \_\_\_\_\_

(Parent's health insurance must pay for illness that is treated while the child is at MBC. Our camp carries limited accident insurance which pays for the cost of treating an accident if the parent's insurance does not and the sponsoring church of your retreat does not)

**HEALTH HISTORY:**

\_\_\_\_\_  
**ALLERGIES:** \_\_\_\_\_

**MEDICATIONS:** \_\_\_\_\_

I HEREBY:

1. Affirm there is no need for a doctor's examination prior to camp based on current health or that such an exam will be obtained with recommendations supplied to camp staff.
2. Authorize qualified camp personnel to give emergency medical care and determine the need for a physician's service.
3. Release Miracle Bible Camp, its staff and volunteer workers from any liability or claims which may arise related to my child's participation in programs at Miracle Bible Camp.

\_\_\_\_\_  
Parent/Guardian Signature (if under 18 yrs. Old) | Date

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## Get Out of School Early Form

Mix Overnight w/ Ignite Student Ministries

May 3 - May 4, 2024

Miracle Bible Camp | Hackensack, MN

Dear School Officials/Teachers:

Please be informed that my child, \_\_\_\_\_, will be away from school on Friday, May 3, beginning at \_\_\_\_\_. I have given my son/daughter permission to attend a Mix Overnight event hosted by Ignite Student Ministry. I would appreciate it if you would make them aware of any assignments which they may miss on that Friday. Thank you.

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