



# WINTER RETREAT REGISTRATION

**PLEASE READ CAREFULLY:** Please complete the following pages as required. If using an Interactive PDF, Oakridge Ministries will accept your typed name as a valid digital signature. If printing and manually filling out these forms, please print clearly! Thank you and God bless!  
Group leaders, have each member of your group complete this form.

CAMPER'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
EMAIL: \_\_\_\_\_ SHIRT SIZE: \_\_\_\_\_ SEX: \_\_\_ MALE \_\_\_ FEMALE  
HOME ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ HOME CHURCH (IF ANY): \_\_\_\_\_  
FACEBOOK: \_\_\_\_\_ TWITTER: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_ PHONE: \_\_\_\_\_  
HOME ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
*If different from above address.*  
WORK PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

*Please provide the following additional contact information in case a Parent/Guardian cannot be reached.*

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

## {BASE RATE}

CAMPER	GROUP LEADER*/PREVIOUS STAFF MEMBER
\$99	\$49

*\*1 adult leader after every 7 campers per group.*

**{SHIRT}** *If you would like a shirt, please send in this form or your shirt size ASAP.  
Shirts will be distributed on a first come-first serve basis. Thank you!*

CAMPER	GROUP LEADER/PREVIOUS STAFF MEMBER
\$10	\$10

## {FINANCIALS}

Base Rate: \$ \_\_\_\_\_ + Shirt: \$ \_\_\_\_\_ = \$ \_\_\_\_\_ Total Camper Cost (Balance Due Upon Arrival)

*If you intend to pay before your arrival, please choose ONE from the following options concerning your payment:*

\_\_\_ A check is enclosed with this packet, the number is # \_\_\_\_\_. \_\_\_ A check will be sent you to in the mail immediately.

\_\_\_ I would like to use a credit card: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_. The expiration date is \_\_\_\_ / \_\_\_\_\_. \_\_\_ MasterCard \_\_\_ Visa \_\_\_ Discover

\_\_\_ I would like to use a credit card. Please call to get my information over the phone.

**NOTE:** Money for Snack Shack and Gift Shop purchases can be placed in an account upon your arrival. We recommend \$20 for Snacks and \$20 for gifts.

Submit the completed forms via Email to **JAIME@OAKRIDGEMINISTRIES.NET** or send in your completed registration packet via standard mail to:

**OAKRIDGE MINISTRIES**

**ATTN: RETREAT REGISTRATION**

**RR 3, BOX 233**

**ANADARKO, OK 73005**



{INFORMED}  
{CONSENT}

# MINOR RELEASE FORM

Please read carefully: Every *minor* (any persons under 18 years of age) attending an Oakridge event with activities *must* have a parent/legal guardian fill out this form. If any individual does not turn in a completed Release Form, they will not be able to register or take part in any form of Oakridge recreational activity. *Thank you!*

PLEASE PRINT CLEARLY	FULL NAME OF MINOR (FIRST, MIDDLE INITIAL, LAST)	AGE	DATE OF BIRTH (MM/DD/YYYY)	SEX	INSURANCE COMPANY	POLICY NO./INFO	PLEASE PRINT CLEARLY

Please fill out **ONE** form for each **RESIDENCE**. Each minor listed above shall henceforth be known as "Participant(s)."

{ MINOR'S  
INFORMATION }

Group/Church: \_\_\_\_\_

Home/Mailing Address: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

{ PARENTS'  
INFORMATION }

Full name/Relationship: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Home/Mailing Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
*if different from above*

Other Contact: \_\_\_\_\_ Home/Cell Phone: \_\_\_\_\_

Relationship to Participant: \_\_\_\_\_

**The Participant(s) understands the following rules/regulations concerning participation in Oakridge recreational activities:**

- {1} NO MINOR may participate in ANY Oakridge activity without a signed Release Form from a parent or legal guardian.
- {2} Any health issues, allergies, reactions, illnesses, medications, treatments, conditions, etc. relevant to the Participant(s) are to be reported in advance; any aforementioned health issues, etc. are to be reported **SEPARATELY** to the group leader responsible for overseeing the Participant(s) while at Oakridge. It is the responsibility of the **ADULTS** and **GROUP LEADERS**, **NOT** Oakridge Staff, to oversee and administer all medications, treatments, etc. to any Participant(s) from their group. Oakridge Camp and/or Staff will not be held responsible for administering or failing to administer any medication, treatments, etc.
- {3} The Participant(s) is in good physical condition and capable of participating in and completing various Oakridge activities. Oakridge offers a wide range of activities, including many high-risk and weapons-related activities such as riflery, archery, waterslide, paintball, Go-Karts, rock- and cliff-climbing, swimming, low elements ropes course, rappelling, water skiing, knee-boarding, etc., as well as transportation in vans, buses, and other vehicles to and from activities.
- {4} The Participant(s) wishes to be accepted for participation in all Oakridge activities, and the Participant(s) acknowledges that some activities will necessarily involve participation in activities which are, by their nature, physically and mentally intense/demanding and subject to possible hazards, not all of which can be foreseen and prevented. The Participant(s) assumes all of the ordinary risks normally incidental to the nature of these types of recreation, including risks and possible injuries which are not foreseeable.
- {5} The Participant(s) hereby releases all rights and claims for damages against Oakridge Ministries, Inc., and its various corporate associations, including its Staff, Directors, Volunteers, and all individuals assisting in instructing and conducting these activities, including the owners and lessors of premises used to conduct any and all activities, from all liability of any nature for any and all injuries, losses, or damages suffered by the Participant(s) at or in any way connected with these injuries, even if arising from the negligence of those persons aforementioned, except that which is the result of gross negligence and/or wanton misconduct.
- {6} In the event of an emergency, the Participant(s) does hereby authorize any X-ray, examination, anesthetic, dental, medical, or surgical diagnosis or treatment by any physician or dentist of any hospital service that might be rendered under the general, specific, or special consent of the Oakridge Staff (in the absence of a spouse, Group Leader, or other group representative). The Participant(s) understands that each Participant(s) must provide his/her own health and accident insurance. In the event of an injury or medical need, expenses incurred will be the responsibility of each individual (private pay), individual personal insurance, or group insurance from the sponsoring group and Oakridge only thirdly.

*I have read this release of liability, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.*

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Oakridge Ministries will accept the above typed name as a valid digital signature.

Mailing List: _____
Date Entered: ____ / ____ / ____
Support: _____

FOR OFFICE USE ONLY.



{INFORMED}  
{CONSENT}

# ADULT RELEASE FORM

Please read carefully: Every **adult** (any persons 18 years of age and older) attending an Oakridge event with activities **must** fill out this form. If any individual does not turn in a completed Release Form, they will not be able to register or take part in any form of Oakridge recreational activity. *Thank you!*

FULL NAME OF ADULT (FIRST, MIDDLE INITIAL, LAST)	AGE	DATE OF BIRTH (MM/DD/YYYY)	SEX	INSURANCE COMPANY	POLICY NO./INFO

PLEASE PRINT CLEARLY

PLEASE PRINT CLEARLY

Please fill out **ONE** form for each **RESIDENCE**. Each adult listed above shall henceforth be known as "Participant(s)."

{ GENERAL  
INFORMATION }

Group/Church: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

{ EMERGENCY  
CONTACT }

Full name/Relationship: \_\_\_\_\_

Home/Mailing Address: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

**The Participant(s) understands the following rules/regulations concerning participation in Oakridge recreational activities:**

- {1} NO MINOR may participate in ANY Oakridge activity without a signed Release Form from a parent or legal guardian.
- {2} Any health issues, allergies, reactions, illnesses, medications, treatments, conditions, etc. relevant to the Participant(s) are to be reported in advance; any aforementioned health issues, etc. are to be reported **SEPARATELY** to the group leader responsible for overseeing the Participant(s) while at Oakridge. It is the responsibility of the **ADULTS** and **GROUP LEADERS, NOT** Oakridge Staff, to oversee and administer all medications, treatments, etc. to any Participant(s) from their group. Oakridge Camp and/or Staff will not be held responsible for administering or failing to administer any medication, treatments, etc.
- {3} The Participant(s) is in good physical condition and capable of participating in and completing various Oakridge activities. Oakridge offers a wide range of activities, including many high-risk and weapons-related activities such as riflery, archery, waterslide, paintball, Go-Karts, rock- and cliff-climbing, swimming, low elements ropes course, rappelling, water skiing, knee-boarding, etc., as well as transportation in vans, buses, and other vehicles to and from activities.
- {4} The Participant(s) wishes to be accepted for participation in all Oakridge activities, and the Participant(s) acknowledges that some activities will necessarily involve participation in activities which are, by their nature, physically and mentally intense/demanding and subject to possible hazards, not all of which can be foreseen and prevented. The Participant(s) assumes all of the ordinary risks normally incidental to the nature of these types of recreation, including risks and possible injuries which are not foreseeable.
- {5} The Participant(s) hereby releases all rights and claims for damages against Oakridge Ministries, Inc., and its various corporate associations, including its Staff, Directors, Volunteers, and all individuals assisting in instructing and conducting these activities, including the owners and lessors of premises used to conduct any and all activities, from all liability of any nature for any and all injuries, losses, or damages suffered by the Participant(s) at or in any way connected with these injuries, even if arising from the negligence of those persons aforementioned, except that which is the result of gross negligence and/or wanton misconduct.
- {6} In the event of an emergency, the Participant(s) does hereby authorize any X-ray, examination, anesthetic, dental, medical, or surgical diagnosis or treatment by any physician or dentist of any hospital service that might be rendered under the general, specific, or special consent of the Oakridge Staff (in the absence of a spouse, Group Leader, or other group representative). The Participant(s) understands that each Participant(s) must provide his/her own health and accident insurance. In the event of an injury or medical need, expenses incurred will be the responsibility of each individual (private pay), individual personal insurance, or group insurance from the sponsoring group and Oakridge only thirdly.

*I have read this release of liability, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.*

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Oakridge Ministries will accept the above typed name(s) as a valid digital signature.

Mailing List: \_\_\_\_\_

Date Entered: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Support: \_\_\_\_\_

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# CAMPER INVENTORY

The following is Oakridge Christian Camp's "What to Bring" list. **GROUP LEADERS**, please copy this list and give it to your group members. **NOTE: some items listed are intended for Children's and Youth Events.**

## "WHAT TO BRING" CHECKLIST

- RELEASE FORMS.** Every **MINOR** must have a Minor Release Form signed by their parent/guardian to be on the premises and to engage in any activity at Oakridge. Every **ADULT** must also sign an Adult Release Form.
- A POSITIVE ATTITUDE.** Everyone should bring a positive attitude to fully enjoy their rest, relaxation, recreation, and refreshment.
- BEDDING.** If you're staying in the **DORMS**, you'll need to bring sheets, blankets, pillows, or sleeping bags. If you're staying in Oakridge's **COMFORT ROOMS**, the pillows, blankets, bedspreads, linens and towels are provided; these items are available for rent in other **LODGES** as needed.
- PERSONAL TOILETRIES.** Toothpaste, toothbrush, comb, hairbrush, deodorant, cologne or perfume, soap, towels, contact lenses and solution, glasses, feminine items, alarm clock, etc.
- CLOTHING.** Remember to bring sufficient changes of undergarments and socks and clothing for all activities you will be engaging in; please remember (**GIRLS ESPECIALLY**) to be mindful of modesty. We will be doing group activities outside, please bring clothing appropriate for cold weather!
- BIBLE & NOTEBOOK.** For Christian Camps/Retreats; remember to bring other learning and retreat materials as well.
- MONEY.** For Snack Shack, and Gift Shop items.
- OTHER ITEMS.** Flashlight, umbrella, personal books to read, camera, chargers, cell phone, etc.
- INSURANCE INFORMATION.** Personal and/or group; insurance **IS NOT PROVIDED** by Oakridge.
- MEDICATION.** Have your group leader dispense any necessary medications.

## "WHAT NOT TO BRING" CHECKLIST

- A NEGATIVE ATTITUDE.** Oakridge Camp is **NOT** the Hilton Hotel, but our Staff will strive to make your stay as comfortable as possible. Let's all leave complaining behind!
- FOOD AND SNACKS.** Oakridge Camp provides 3 delicious meals a day, and a full-service Snack Shack. Outside meals or snacks brought onto the property are discouraged.
- PRACTICAL JOKE GEAR.** Things like water balloons, shaving cream, etc., can cause damage to property and to people's feelings, if you aren't careful. Any organized "battles" can be planned through your group leader, in cooperation with Oakridge, but **MUST** be outside.
- APPLIANCES AND ELECTRONICS.** No microwaves, refrigerators, or other appliances; radios, CD players, televisions, portable gaming systems, etc., are discouraged to allow for more interpersonal interaction.
- PETS.**
- RECREATION EQUIPMENT.** Oakridge provides a wide range of equipment, so you probably will not need anything. Call Oakridge at **405.247.5433** if you have any questions.
- ALCOHOL, ILLEGAL DRUGS, TOBACCO PRODUCTS.** Those **ADULTS** who choose to smoke, dip, or chew tobacco while at Oakridge may do so **OUTSIDE** in designated areas, being mindful of fires.
- INAPPROPRIATE CLOTHING.** Clothing that is immodest, revealing, too tight, and suggestive of sin or promotes anti-Christian lifestyles are not allowed. **GIRLS: PLEASE NO PANTS WITH WRITING ACROSS THE BOTTOMS, NO LOW-CUT TOPS, NO SHORT-SHORTS, NO SPAGHETTI STRAPS, ETC.**
- UNAUTHORIZED FIREARMS, KNIVES, ARCHERY, OR OTHER WEAPONS.**