

\$160



encounter weekend

@ Lakeview Camp and Conference Center

It's Time for Encounter!

-best weekend of the year-

2023 Encounter Weekend

Dear Parent/Guardian,

We are excited for our 2023 Encounter Weekend coming up January 13-15 at Lakeview Camp and Conference Center in Waxahachie, TX. This retreat is one of the highlights of our year because it is a time where every student and leader can encounter God like never before. This retreat will consist of fellowship with other students, small groups, breakout sessions, and morning/night services. We will also have guest speaker Pastor Weston Weaver from Eunice, LA with us! We are excited for what God is going to do through this amazing experience, and we would love for your child/children to be a part!

Grades: 6-12th Location: Lakeview Camp and Conference Center | Waxahachie, TX Dates: January 13-15 Cost: \$160 [\$40 Deposit] Register @ roseheights.org/events or @ roseheights.org/students

Payment Breakdown: Oct. 12th- \$40 [initial deposit + application] Nov. 9th- \$40 Dec. 7- \$40 [late application form due] Jan. 11th- \$40 Total: **\$160**

For more information, please do not hesitate to call or email.

Blessings, **Caleb Flowers** Student Ministries Pastor

903-566-2020 Ext. 12 251-232-4077 caleb@roseheights.org

Encounter Weekend Guidelines and Rules



These rules are given as guidelines for every student and adult personnel to follow. This code of conduct has been established for the protective benefit of each student and adult personnel. Rules must be observed at all times. Failure to comply with rules may result in expulsion from the Retreat with no refund.

Parents are asked to help in explaining these rules to their student and encouraging their compliance while at the Retreat.

- The daily schedule must be followed and attendance at all activities is required.
- No one is to leave the Retreat or place of activity without specific permission from Pastors Caleb and Christine (Student Pastors–Main Campus) and Pastor Lindy (Student Pastor–Lindale Campus).
- All adult volunteers and personnel are authorized to maintain order anywhere and everywhere during the Retreat.
- Students are expected to have personal and group cleanliness, courtesy, and Christian conduct.
- Males and females are not allowed to be alone at any time throughout the Retreat.
- We reserve the right to inspect the contents of all personal belongings. The holding and/or disposal of improper contents are the right of the adult leaders.
- Profanity will NOT be tolerated during the Retreat at any time.
- No alcohol, tobacco, or vaping products of any kind are allowed during the Retreat by adults or students.
- Dress Code must be followed at all times: See Dress Code on the next page.
- Retreat Activities are open only to registered students and adult leaders.
- Students and their parents will be held financially responsible for any intentional or accidental damage caused to the facilities, equipment, vehicles, etc.
- Serious offenses, such as banned substances (drugs, alcohol, vaping products, firearms, fireworks) will be met with immediate dismissal from the Retreat, as well as notification of local authorities as required by law.
- Further, the lack of cooperation, unnecessary roughness, lack of respect for property, or an unwholesome attitude on the part of any student may result in expulsion from the Retreat.

• STUDENTS NOR PERSONNEL WILL BE ALLOWED TO PARTICIPATE IN PHYSICALLY DEMANDING GAMES UNLESS THEY HAVE PERSONAL INSURANCE COVERAGE.

Please Note: Rose Heights Church and its Leadership are not held responsible for any lost or stolen items. It is the student's responsibility to keep their items secured.

Dress Code:

Our dress code during the Retreat is based on the biblical principles of modesty, neatness, and appropriateness/safety for activities. The following guidelines are for students and adult leaders.

- No undergarments or midsections showing.
- No clothing with inappropriate symbols or messages (including alcohol, tobacco, or sexually suggestive language or images).
- Wear appropriate church clothes for services.
- If students wear something that leaders deem inappropriate, students will be asked to change clothing.
- Shoes must be worn at all times during activities.

What to Bring to Encounter...

- A great attitude
- Bible
- Note Pad/Pen
- Clothes for night services
- Towel
- Bed linen

• Soap + Shampoo

- Pillow
- Sunglasses if needed
- Toiletries as needed
- \$20-\$30 for Lunch at Grapevine Mills Mall
- Extra Money for snacks

Girls:

- Shorts must be "Fingertip Length." No short shorts or skirts. No halter tops, tube tops, bare midriff tops, or spaghetti strap tops.
- Athletic leggings must be worn with shorts or a long shirt.

Boys:

• Shorts must be "fingertip length." No short shorts.

Important Dates:

- Oct. 12th- \$40 [initial deposit + application]
- Nov. 9th- \$40
- Dec. 7th- \$40 [late application form due]
- Jan. 11th- \$40

Summer Conference Tentative Itinerary

January 13th

- 3:30pm / Meet at Rose Heights Church
- 4:00pm / Leave for Lakeview Camp
- 6:30pm / Arrive @ Lakeview Retreat Center [5128 FM 66 Waxahachie, TX 75167]
- 6:45pm / Dinner
- 7:30pm / Small Group
- 8:00pm / Youth Service
- 9:30pm / Free Time
- 12:00am / Lights Out

January 14th

- 8:00am / Breakfast
- 8:45am / small groups
- 9:30am / Morning Service
- 11:30pm / Lunch
- 12:30pm / Break Out Sessions
- 1:30pm / Small Groups
- 2:30pm/ free time
- 5:00pm / dinner

- 6:00pm / small groups
- 7:00pm / Youth Service
- 9:00pm / Black Light Dodgeball
- 12:00am / lights out

January 15th

- 8:00am / Breakfast
- 9:00am / Morning Service
- 11:30am / Leave Lakeview
- 12:30pm / Stop at Grapevine Mills Mall [3000 Grapevine Mills Pkwy, Grapevine, TX]
- 3:00pm / Leave Grapevine Mills Mall
- 5:30pm / Arrive at Rose Heights

During the retreat parents/guardians can contact:

Pastors Caleb and Christine Flowers: 251-232-4077 | 251-533-4288 Pastor Lindy Gore: 940-452-5345 Mallory Goforth: 903-530-3620

EMERGENCY MEDICAL INFORMATION AND EVENTS PERMISSION

PLEASE NOTE: It is only necessary to complete this form once a year. January 1, 20__ - December 31, 20__

GENERAL IN	IFORMATION	
Full (Legal Name)	Name of Physician	
Address	Address	
City, TX Zip	City, TX Zip	
DOB// Age	Office #()	
Home #()		
Cell # ()	INSURANCE INFORMATION	
	Company Name	
Father's Name	Policy #	
Home #()		
Cell # ()	If unable to contact parents first, call:	
	Name	
Mother's Name	Relation	
Home #()	Home #()	
Cell # ()	Cell # ()	
HEALTH	HISTORY	
EVER HAD OR CUBBENTLY HAS:		
YES NO	YES NO	
Appendicitis	Allergic to Aspirin	
Asthma or Hay Fever	Allergic to any Medications	
Hernia (rupture)	Currently taking any Medication	
Rheumatic Fever	Allergic to Bee Stings	
Diabetes	Carries an Epi-Pen	
Insulin	Restricted activity for Medical Reasons	
Heart Trouble	Date of last tetanus shot//	
Sever Allergies		
Scarlet Fever	Significant Disease, Injury, Operation, or if you	
Sinus Trouble	have answered yes to any of these questions,	
Fainting Spells	please explain on the bottom of the other side of this form.	
Ear Trouble	uns ionn.	
Convulsions		
Poison Ivy, Oak or Sumac		
Reaction to Penicillin		

MEDICAL RELEASE AND PERMISSION FOR EVENTS

grant part o volunt said a said c Heigh them	FRose Heights Church in eer of the Connect Stude ctivities and do hereby re hild whatsoever as a res ts, its staff, and voluntee	enager to attend to Tyler, Texas. I u ent Ministries. I h elease and give u ult of said child's rs, their respectiv penses incurred	uardian(s) of	by an adult nvolvement in ny injury to to hold Rose indemnify
(initial)	hereby authorize medic	cal treatment, incl	eights Church to seek medical treatment for sa luding but not limited to emergency surgery or lical expenses, if any incur.	
(initial)			orize Rose Heights Church and its adherents t motional purposes (print and/or online).	o publish
(initial)	This permission shall re delivered to said agent		nless revoked in writing and delivered to said ag	ent(s).
Effect	ve this day of (date)	(month)	, <u>(year)</u> .	
<u> </u>				1 1
Printe	d Name of Parent(s) or	Guardian(s)	Signature of Parent(s) or Guardian(s)	(DATE)
	d Name of Parent(s) or Signature of Notar		Signature of Parent(s) or Guardian(s)// (DATE)	(DATE)
	Signature of Notar	MEDICAL		
	Signature of Notar	MEDICAL		