

We are kicking off the school year with an amazing trip to SANTA CRUZ! We will be going Friday September 26-Sunday September 28.

## To get signed up:

- Text SANTACRUISIN to 51400
- Talk to a Campus Life leader
- Turn in registration payment:\$75
- Turn in Permission and Medical Form



#### FOR MORE INFORMATION:

Paul Scholz, GB Campus Life 916 223 4327 paulcampuslife@gmail.com www.hscampuslife.blogspot.com

Alex Sadri, OHS Campus Life 916 296 0669 alexcampuslife@gmail.com

Eddy Sanchez Adelante Campus Life

Justin Waffird, TEEN
West Sac
Teen Center
916 910 3302
jwaffird@yahoo.com

Omar Turner, Crossover Basketball 916 628 0935 omar@crossoverbasketball.org



Gladys Standard *City Life – Sayonara* 916-801-0726 gladys@citylifecenters.org





### **SCHEDULE:**

### **FRIDAY**

- Leave right after school
- Arrive at Camp

### **SATURDAY**

- Go to the Beach!
- Get Maryanne's Ice Cream

### SUNDAY

- Time to hang out
- Clean up camp
- Arrive home around 4:00pm

#### What to pack: Please pack light!

Sleeping bag, pillow

Toiletries: toothbrush and anything else you need

Layered clothing: Shorts, pants, shirts, sweatshirts

Swimsuit (please dress modestly in a 1-piece)

Beach stuff: boogie boards, toys, other

– please talk to leader to see if there
is room

Notebook, pen Money for Ice Cream

**NOTE ABOUT ELECTRONICS:** Bring at your own risk! We will be asking that all electronics stay out of sight so as to not distract from the trip. Parents please talk to your child about cooperating.



# CAMPUS LIFE SANTA CRUISIN' PERMISSION FORM

, the undersigned, certify that I am the parent/
egal guardian of
(student), a minor, and that the Student is in good
physical condition and able to participate in all
activities sponsored by YOUTH FOR CHRIST and
CAMPUS LIFE CONNECTION.
understand that the opportunity to attend YOUT

FOR CHRIST and CAMPUS LIFE CONNECTION activities is a privilege. In consideration for that privilege, I am signing this Release of Liability form on behalf of myself and my minor children. I understand that my child may participate in any number of physical activities some of which include, but are not limited to, recreational activities and games. I understand that there are certain risks of physical activity or illness associated with these activities. In addition, I understand that there may be other risks associated with these activities of which I may not be presently aware. By signing this Release, I expressly assume these risks for my child and me, whether such risks are known or unknown to me at this time. I release YOUTH FOR CHRIST and CAMPUS LIFE CONNEC-TION, including its affiliated chapters and their officers, directors, volunteers, employees, contractors and agents, from any claim that I or my children may have now or in the future against them for any physical and personal injury, illness or death due to participation in YOUTH FOR CHRIST and CAMPUS LIFE CONNECTION activities. The release of liability shall cover (without limitation) all claims for negligence and breach fiduciary duty asserted by my child or any person made on their behalf.

Darent	Guardian	Signature
Parenn	CHUALCHALL	Signature

Date

**HOME PHONE #** 

**CELL PHONE #**