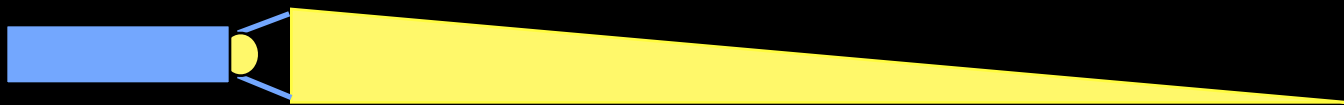
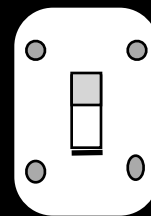


# NaCoMe Fall Retreat 2010

## Hit The Lights!



[NaCoMe Camp & Conference Center](#)

## Presbytery of Middle Tennessee

### WHEN?

October 15-17, 2010, registration begins at 5 p.m. in the Dale Building  
The retreat will end after worship on Sunday morning.

### WHY?

NaCoMe is a fun place to meet and connect with other Presbyterian Youth and grow more in your faith. The “Hit The Lights!” theme discusses different methods of exploring your faith through activities of Worship, Keynote, Music, Recreation, and Workshops.

**WHO'S IT FOR?** All current 6th graders to 12th graders and their adult leaders. Please have one adult for every 6 youth.

### HOW MUCH?

\$100 per person. Cost includes meals, lodging, activities, and t-shirt.

### WHAT DO I BRING?

Sleeping bag, linens for twin/full size bed; Pillow; Towel; Personal toiletry items; at least 2 pairs of shoes (ones that can get dirty); Extra pairs of socks; Flashlight; Bible; Warm clothes (that can get dirty & are camp appropriate); Warm coat; Musical instruments; and a desire to learn!

Retreat Covenant:

- I will try to create a positive atmosphere for all youth and adults attending this retreat
- I will actively participate in all group gatherings and follow the schedule at all times
- I will respect the property of the camp as well as the participants
- I will not leave the premises
- I understand that alcohol, tobacco products, drugs, and weapons are never permitted at NaCoMe
- I understand that the violation of this covenant will result in my early dismissal from camp

Participants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Youth Parent/Gaurdians Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Registration Form: Please PRINT clearly; REGISTER BY Monday, October 4, 2010**

Name: \_\_\_\_\_ (Male/Female) Adult \_\_\_\_ Youth \_\_\_\_ Grade \_\_\_\_  
 Home Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 T-Shirt Size: \_\_\_\_\_ Email address: \_\_\_\_\_  
 School Name: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Church Name: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

I give my permission for my son/daughter to attend the NaCoMe Fall Youth Retreat 2010. I understand that if my son/daughter needs medical attention, every effort will be made to contact me. If I cannot be reached, I hereby authorize the adult leadership of the camp to obtain the medical care he/she might need.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Phone #'s: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Other Emergency Contact: Name: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_  
 Special Medical Concerns & Needs: \_\_\_\_\_

**Please rank the following workshop selections in your order of preference:**

(1 as first choice, 8 as last choice)

- |                |   |
|----------------|---|
| ___ Art        | ___ Mission                                     |
| ___ Writing    | ___ Prayer Walk                                 |
| ___ Music      | ___ Drama                                       |
| ___ Worship    | ___ Community Building (please fill out waiver) |
| ___ Leadership |   |

**Return completed Registration Form, Signed Covenant, and registration fee, by October 4, 2010 to:**

**NaCoMe Camp and Conference Center**  
**3232 Sulphur Creek Road**  
**Pleasantville, TN 37033**  
**Nick Reed: 931-388-1985**  
[nickreed@bellsouth.net](mailto:nickreed@bellsouth.net)

Checks may be made payable to NaCoMe Conference Center