Saint Barbara Greek Orthodox Church

GOYA Fall Retreat

Friday – Saturday September 24-26, 2021

Registration: $200
Includes lodging, food, travel & all planned activities

Channel 3 Kids Camp
Ages 12-18

Register for the trip by Sunday, September 14, 2021
Space is limited so please register early

Join us for a weekend of fun and excitement at Channel 3 Kids Camp, located in scenic Andover, Connecticut (73 Times Farm Road). There are many fun activities planned throughout the weekend as we enjoy the magnificent setting and campgrounds.

What to bring:
Sheets & Blankets or Sleeping Bag, Towels, Pillow, Toiletries, Flashlight, Sneakers, Jeans, Shorts, Short and Long Sleeve Shirts, Sweatshirt or Sweater, Pajamas, Underwear, Socks, Bug Repellent.
Church Clothes for Sunday Morning (we will be attending Sunday Liturgy at The Three Hierarchs Greek Orthodox Chapel at the University of Connecticut (28 Dog Lane, Storrs, Mansfield, Connecticut).
Please remember to also bring warm clothes to wear at night as it might get chilly.
No radios, iPods, valuables or cell phones please!
Saint Barbara GOYA Retreat Registration and Health Form

Name: _____________________________________________ Grade: ___________________

Date of Birth: ________________________ Parent’s Cell Phone: ________________________

Parent’s Home Phone: ________________________________ E-Mail: __________________

Pediatrician’s Name and Phone Number: ____________________________________________

Are there any allergies or medical conditions that we need to be aware of? __________________

____________________________________________________________________________

____________________________________________________________________________

Is your child on medication? _____________________________________________________

____________________________________________________________________________

If yes, please list the medication and dose: ___________________________________________

____________________________________________________________________________

Should your child’s activities be restricted in any way? If yes, please specify: ________________

____________________________________________________________________________

Do we have permission to administer Tylenol, Benedryl or Antacids to your child? __________

Person to contact in case of an emergency (please include phone number)

1. _____________________________________________________________________

2. _____________________________________________________________________

I hereby give my child permission to take part in all the GOYA Fall Retreat activities. In case of
an emergency, I give permission to the GOYA Advisors to administer first aid. Should medical
attention be required, I give permission for the GOYA Advisors to seek further qualified medical
assistance until I can be contacted.

__________________________________
Signature of parent or guardian