

Journey In January High School Retreat, Camp Lutherhoma

"Journey to the center of you"

January 15-17, 2010

You Are Registered. Read the details below and the confirmation letter for more information. See you!!

"Love must be sincere. Hate what is evil; cling to what is good. Be devoted to one another in brotherly love. Honor one another above yourselves."

Romans 12:9-10

What to expect:

Bible study (led by your peers)
Praise and Worship time
Personal quiet time and "God" time
Fellowship with other High School students
Singing, dancing, laughing, smiling
Fun as we are reminded of who we are and whose we are

What to bring along:

Bedding/ toiletries/towels
Extra \$ for souvenirs
Bible
Warm clothes
Snow/rain gear

Arrival time for Journey: 8:00-9:00 pm, January 15, 2010

Departure time for Journey: 1:00p.m. January 17, 2010

We can't wait to see you at Camp!!!!

Contact Camp Lutherhoma or your church office for more Information and directions. We don't recommend using Mapquest for directions to Lutherhoma!

Camp Lutherhoma
P.O. Box 1672
Tahlequah, OK 74465
(918) 458-0704
Fax (918) 456- 2919
www.lutherhoma.com



"Nurturing discipleship in our Lord, Jesus Christ in outdoor settings, which excites believers to share the love of Christ to the world."

At Camp Lutherhoma

January 15-17, 2010

Registration Deadline: December 31, 2009

Theme - Journey to the center of you!

Age: In 9-12th grades this year.

Where are you at in your spiritual walk with God?	This year our Journey In January will be asking people to take a look at what is at their core while on their journey with Christ. We will find out that while discovering ourselves we then can reach out and love the people surrounding us in our day to day lives. Most importantly we will explore and discover where God is at in this journey. Come join us this January when we take a journey to the center of you!
How are you there for your friends in time of need?	
Where is God in our life journey?	

Cost: \$90, includes housing, meals and program costs.

Deposit: \$25 is requested per person upon registration

After December 31: \$110 per person.

- 1. Confirmation information will be sent to your church**
- 2. You must register as a church youth group.**
- 3. No adult supervision will be provided by Camp Lutherhoma, but we would be happy to work you into another youth group.**

For more information contact Camp Lutherhoma at:

P.O. Box 1672

Tahlequah, OK 74465

918-458-0704

www.lutherhoma.com

e-mail: Lutherhoma@lutherhoma.com

OR contact your church office

Journey In January High School Retreat
At Camp Lutherhoma
January 15-17, 2010
Registration Deadline: December 31, 2009
Theme – Journey to the center of you!

GROUP REGISTRATION FORM

Mail this completed form, along with your individual forms, to:
Camp Lutherhoma
P.O. Box 1672
Tahlequah, OK 74465
918-458-0704

Registration: \$90, Deposit \$25. Refund only deposit before
December 31. No refund after December 31. \$110 after
December 31. You can replace people or add people as late
as Jan. 4.

Registration on Friday night, Jan. 15 is from 8:00-9:00 pm

HOME CHURCH _____

CHURCH ADDRESS _____

CHURCH PHONE _____ CHURCH E-MAIL _____

COUNSELOR'S NAME: _____

COUNSELOR'S ADDRESS _____

COUNSELOR'S PHONE (HOME) _____ (CELL) _____

COUNSELOR'S EMAIL ADDRESS _____

Confirmation and Packet will be mailed to Counselor at church address unless otherwise noted.

CHURCH NAME _____ CITY _____

WE PLAN TO ARRIVE AT _____ P.M.

Please fill out the following group information for each participant.

	NAME	Youth	Counselor	T-shirt size
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				
9)				
10)				
11)				
12)				
13)				
14)				
15)				

T-shirt Totals: Small _____ Medium _____ Large _____ XL _____
 XXL _____ (Include \$5 extra for XXXL _____)

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Individual Registration Form, 2010

Name _____

Address _____

City _____ State _____ Zip Code _____ T-shirt size _____

Age _____ Gender M F Birth date ____/____/____ Year of H.S Graduation _____

Parent/Guardian Full Name _____

Phone Number _____ Emergency Phone _____

Cell phone _____ E-MAIL: _____

Church _____ Church City _____

Coming with your youth group? _____ Adult Counselor _____

NO LUTHERHOMA ADULT SUPERVISION AVAILABLE!

(I understand that I am expected to pay for any medical expenses with my insurance.)

Health or Medical Insurance Company _____

Policy Number _____ Phone Number _____

(please attach a photo copy of insurance card if possible)

Doctor Name _____ Phone Number _____

List any medical conditions that camp should know about: _____

List any medications that will be taken during the Retreat and Dosage: _____

PARENTS PLEASE READ AND SIGN: My child has permission to take part in all the activities of this Retreat, January 16-18, 2009 at Camp Lutherhoma. I hereby authorize camp authorities to use local doctors and/or hospitals if a medical emergency arises and I cannot be contacted. I understand that I am to pay for any medical expenses necessary with my insurance.

PARENT/GUARDIAN SIGNATURE _____

DATE _____

SEND THIS FORM TO: CAMP LUTHERHOMA

P.O. Box 1672

Tahlequah, OK 74465

Phone # (918) 458-0704

Fax # (918) 456-2919

E-mail: lutherhoma@lutherhoma.com