LEGACY YOUTH CONFERENCE MARCH 16-18, 2018 CALGARY, AB

AWAKEN

Each day brings new opportunities, new moments of God at work in the world. But do we notice? What would happen if we all awaken to God's purposes for us and follow the Spirit's leading? How would we change? How would our world change? Let's find out together.

LYC is a student led conference as part of a class at Ambrose. LYC is designed for grade 10-12 students that want more. More of God and more of life. You can expect; inspired worship, solid Bible preaching, engaging challenge for life change, good food, and great people and laughs.

Parent Information

- LYC is a weekend event at Ambrose University College in Calgary. (Transportation, conference and most meals are included.)
- Registration for LYC 2018 will begin **Jan 14th** on a first come first serve basis cutting off on **Jan 24th**.
- To confirm registration
 - full payment of \$200.00
 - fully completed Authorization form (attached)
 - **on-line conference registration form** https://ambrose.edu/lyc-2018-delegate-release-form.
- Cancellations will be subject to a minimum \$25 fee. There are no refunds of the total amount unless your ticket can be resold.
- We will be leaving at **2:15 pm sharp on Friday afternoon** (March 16) and returning at approximately 9:00 pm on Sunday night (March 18).

What to Bring

Sleeping bag, pillow, toiletries, towel, Bible, pen, note pad, gym shoes, and warm clothes.

ST. ALBERT ALLIANCE CHURCH LYC 2018 AUTHORIZATION AND MEDICAL CONSENT

Student Name:		
Address		
Parent Phone #	Grade	_ Student Cell Phone #
Date of Birth	Health	n Card
Family Doctor		_ Phone #
s your child bringing any	y medication	n with him/her? If yes, please list.

Does your child have any medical or behavioural issues leaders should be aware of? If yes, please explain.

Parents'/Guardian Name	
Parent E-mail	
Parent cell phone	

The safety of your child is our primary concern. Precautions will be taken for their well-being and protection.

I/we, the parents or guardians named above, authorize the Leadership Team of Merge Student Ministries and/or a Merge staff person to sign consent for medical treatment and to authorize any physician or hospital to provide medical assessment, treatment or procedures for the participant named above.

I/we, named above undertake and agree to indemnify and hold blameless the Leadership Team of Merge Student Ministries and/or Merge staff, St. Albert Alliance Church, its Pastors and Board of Elders from and against any loss, damage or injury suffered by the participant as a result of being part of any activities of St. Albert Alliance Church as well as of any medical treatment authorized by the supervising individuals representing the church.

Parent/Guardian:

Signature _____ Date _____

Valid from March 16-18, 2018

• Please check box that you have filled out on-line conference form