



FBCN INSPIRE WEEK



Youth, Grades 7-12

JULY 20TH-25TH

CAMP COMO
COLORADO

Join us as we explore how to experience God in every area of your life - experience the majesty of Christ in the beautiful mountains of Colorado!

Week Includes:

- Small Groups
- Teamwork
- Prayer
- Group Sessions
- Campfires
- Bible study
- Hiking
- And Much More

FOR MORE INFORMATION AND TO
REGISTER CONTACT:

Jonathan Stewart
(580) 603-0065
Jonathan@fbcnewalla.com



FBCN Inspire Week Registration

Please return completed form and registration fees to FBC Newalla

Attendee Information

Name (first and last) _____ Cell _____

Date of Birth ___ / ___ / ___ Grade _____ School _____

Church Affiliation _____ Gender: Male Female

Interests (sports, music, etc.) _____

Camp Registration

Dietary Restrictions (provide details below) Yes No

Restrictions _____

Allergies, Medical Conditions, or Illnesses (provide details below) Yes No

Details _____

Inhalers or Medications (provide dosage and schedule details below) Yes No

Details _____

Other Considerations _____

Liability Waiver/Image Release

I have read, understood, and signed the waiver and release forms (pages 2-3) Yes No

Print Name (Parent/Legal Guardian)

Contact Number (Parent/Legal Guardian)

Parent/Legal Guardian Signature

Date

Contact Email (Parent/Legal Guardian)

THE FBCN INSPIRE WEEK PHOTO RELEASE FORM

I hereby grant the First Baptist Church of Newalla permission to use my likeness in a photograph, video, or other digital media (“photo”) in any and all of its publications, including web-based publications, without payment or other consideration.

I understand and agree that all photos will become the property of the First Baptist Church of Newalla and will not be returned.

I hereby irrevocably authorize the First Baptist Church of Newalla to edit, alter, copy, exhibit, publish, or distribute these photos for marketing purposes. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

I HAVE READ AND UNDERSTAND THE ABOVE PHOTO RELEASE. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENTS/GUARDIANS AS EVIDENCED BY THEIR SIGNATURES BELOW. I ACCEPT:

Print Name

Signature

Date

If under 18, PARENT/GUARDIAN MUST SIGN

Individually and as Parent and/
Legal Guardian

Date

CONSENT FOR ACTIVITY &
PERMISSION FOR EMERGENCY MEDICAL ATTENTION

TO: First Baptist Church of Newalla

The undersigned, a parent(s) or guardian, of child _____ request
that the said child be permitted to engage in the following church activity:

Abundant Life Inspire Week
Como, Colorado
Monday, July 20 Thru Saturday, July 25, 2026

And as a prerequisite consideration, agree: That only general supervision of the child participating in the activity can be given; that neither the church, any of its staff, or any church member are liable for any injury of said child from such activity, including use of bus, church van or private vehicle; and to hold the church, all of its staff, and all church members harmless on any claim for damages made by or for growing out of the activity, including, all expense of defending same.

I hereby give permission for church staff or sponsor to oversee medical attention in the event of an emergency.

Date

Parent(s) or Guardian of Child

Emergency Contact Information:

Parent / Guardian

Phone #

Parent/ Guardian

Phone #

Family/ Friend

Phone #