

IT'S RALLY TIME!!!

If you are a youth in grades 6 through 12, please join us for a one-night youth rally at Camp Mechuwana in February!

We look forward to a weekend of fellowship, friends, and time spent in small and large groups doing a variety of activities together.

We will have time for our traditional activities, including, games, a dance, great food and fellowship. And if weather permits, we may even do some snow sculptures outside!

Come take part in this wonderful youth program. If you have never been before – we hope that you will check it out and maybe even bring a friend.

Find us on the web at www.mechuwana.org

Scholarships for this event are available. Please contact the camp office before the rally in order to apply.

WHO? Youth in Grades 6-12

WHEN? Saturday-Sunday, February 9-10, 2019

Drop off Saturday at 10:00 a.m.

Pick up is on Sunday at 11:00 a.m.

WHERE? Mechuwana

HOW MUCH? \$35.00

Things to Bring: Sleeping bag, pillow, toiletries, positive attitude, and warm clothes for outdoor activities and outdoor worship.

We understand due to other activities you may only be at part of the weekend or have to leave and come back. That's fine but please let us know of your plans in advance.

The Mechuwana Youth Program is a ministry of the United Methodist Church and is open to anyone. Join us for a weekend of Christian fellowship and fun!

If you have questions about the event or would like to request a scholarship form, please call the camp office at 207-377-2924.

Please mail registration form to: Mechuwana Youth Program, PO Box 277, Winthrop, ME 04364
You can also email your registration to Mechuwana@fairpoint.net.

Name _____ Age _____ Grade _____ Sex _____ Phone _____

Address _____ City _____ State _____ Zip _____

Emergency contact name and phone _____

Any medications/medical conditions/allergies/food allergies/special diet??(use backside of form for medication information)

Will you be arriving late/leaving early? _____

Email address: _____

Please initial if your child **is** allowed to be given over the counter medication if necessary (Tums, ibuprofen, cough drops) _____

****I promise that I will follow the rules of Mechuwana and its youth program so that I and others may have a safe and positive Christian experience. I realize that if I do not, I may be sent home immediately.**

****I give camp permission to take pictures of me during the event for use on their website and in publications.**

(If you do not give camp permission to use your photo, please here: _____)

Rallygoer's signature _____ Parent/Guardian's signature _____

Mechuwana
PO Box 277
Winthrop, ME 04364

RETURN SERVICE REQUESTED

Non-Profit Org.
U.S. Postage Paid
Winthrop, Maine
Permit No. 71

Find us online at www.mechuwana.org or contact us at:
207.377.2924 or Mechuwana@fairpoint.net

If your child requires medication(s), we ask that you please help us by answering the following questions:

Child's name: _____

Medication(s) and Time(s) Given:

If there are any questions, who can we call? _____

Cell/Phone # _____ Relationship to child _____