

YOUTH SCHOOL - WELCOME

Come join the Board of Global Ministries and United Methodist Women for spiritual growth and to expand your knowledge and concepts of mission. The 2017 studies are:



Living as a Covenant Community

This study examines major covenants throughout the Bible and what they reveal about God's character and eternal love for us. It will enhance your understanding of how God works with us, in us, and through us.



In Mission Together: A Youth Study on Missionary Conferences

The youth study focuses on the three U.S. missionary conferences of The United Methodist Church: Alaska United Methodist Conference, Oklahoma Indian Missionary Conference, and Red Bird Missionary Conference. It also offers opportunities for youth who are interested in relationship-building and hands-on mission.

Dean: Rev. Alexis Brown
faithnfit@gmail.com



BETHESDA MARRIOTT
 5151 Pooks Hill Road
 Bethesda, Maryland 20814



REGISTRATION / MEAL INFO.

Registration begins at 10 AM on Friday, July 28. Opening worship will begin at 12:30 PM with the first class to follow. The MISSION u event will conclude around 2:30 PM on Sunday, July 30. Meal Plan: 2 breakfasts, 3 lunches, 2 dinners. Commuters receive 3 lunches and 2 dinners.

ACCOMMODATIONS

Rooms	Postmarked before 6-30-2017	Postmarked after 6-30-2017 thru 7-11-2017
Double (2 in a room)	\$240	\$255
Triple (3 in a room)	\$200	\$215
Quad (4 in a room)	\$185	\$200
Commuter rate	\$125	\$140

Included in the cost is a \$50 non-refundable registration fee.

No registrations accepted or refunds given after 7-11-2017

The above costs are for EACH PERSON sharing a room. The School **will not** assign roommates. Separate registration forms are required for each person. **Roommates should send information together.**

Include payment in full with check payable to "Mission u" and send to: Zilpha Pinkney, 6705 Eilerson St, Clinton, MD 20735

Youth School Questions?

Contact Dean Alexis Brown at 202-723-5454.

YOUTH REGISTRATION

Please print and complete each line. Will need an email address to send confirmation.

NAME	
STREET ADDRESS	
CITY	
STATE	ZIP
PHONE	
EMAIL	
DISTRICT	
DATE OF BIRTH	GRADE/FALL OF 2016

Health/Dietary Concerns

Accommodations

Interpreter Tactile Mobility

Room Choice

double triple quad commut

AMOUNT ENCLOSED _____ Ck # _____

ROOMMATE (s) _____

Female Male

1ST TIME TO MISSION U? Yes No

United Methodist Woman? Yes No

Name of Chaperone _____

CONSENT FORM

To whom it may concern: The undersigned does hereby give permission for:

_____ (Full name of Child)

to attend and participate in activities sponsored by the MISSION u / Youth School **Jul 28 – 30, 2017**. We (I) authorize an adult, in whose care the minor has been entrusted, to consent to any x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care, to be rendered to the minor under general or special supervision and on the advise of any physician or dentist licensed under the provision of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. The undersigned shall be liable and agree (s) to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to the authorization. Should it be necessary for our (my) child to return home due to medical reasons, or otherwise, the undersigned shall assume all transportation costs. The undersigned does also hereby give permission for our (my) child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by the MISSION u. I consent to the use of my child's image or voice in photographs, audio and/ or video recordings taken during the course of the event for the purpose of promoting MISSION u.

Insurance: ___ YES ___ NO

Insurance Company _____

Policy # _____

Allergies _____

Medical Conditions _____

Youth Participant signature _____

Parent/Guardian signature _____

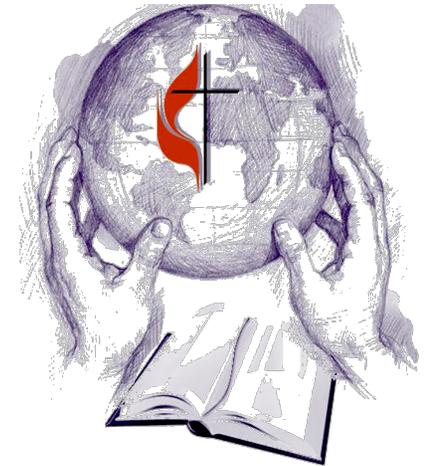
Emergency contact phone _____

Email _____

Zilpha Pinkney
6705 Eilerson St.
Clinton, MD 20735

BALTIMORE-WASHINGTON CONFERENCE UMC
United Methodist Women and
Conference Board of Global Ministries

2017 Youth MISSION u School



Jul 28 - 30

THE BETHESDA MARRIOTT
5151 Pooks Hill Road
Bethesda, MD 20814

Google: Marriott Bethesda MD Pooks Hill

