

YMJA Youth Retreat - Northwest Retreat

All information requested must be provided in order to process your registration.

Name _____

Address _____

City, State, Zip _____

Email Address _____

Date of Birth _____ Phone (____) _____

Congregation _____ Congregational Leader _____

Registration Fees Received:

Price:

- | | |
|---|--|
| <input type="checkbox"/> Before August 21, 2009 | \$124.00 |
| <input type="checkbox"/> After August 21, 2009 | \$154.00 |
| <input type="checkbox"/> YMJA '09 Membership Dues
(13-30 year olds only) | \$10.00 Single
\$15.00 Married Couple |

* Membership dues are required if not a current member.

** Registration fees are the same for all retreat attendees including Youth Leader, Chaperons, and other leaders.

Total: _____

Please make your check or money order payable to the YMJA. Sorry, but we do not accept credit cards. All fees are non-refundable.

For those who are renewing their membership or becoming a member for the 1st time, please complete the bottom section.

Are one of your parents or grandparents Jewish?

- Yes No

Statement of Faith

I have made my public confession of faith in the Messiah Yeshua (Jesus). I have accepted Him personally as my Lord and my Savior. I believe in His Deity, His atonement for sin, and His resurrection from the dead. I accept the scriptures (Old and New Covenants) as the supreme rule of faith and life. In applying for Membership to the Young Messianic Jewish Alliance, I affirm my adherence to the above Statement of Faith. I also affirm that all the information represented on this form is truthful and accurate to the best of my knowledge.

Signature _____ Date _____

Please detach and mail your registration with a check or money order to:

YMJA Retreat NW Phone: 770-592-6999
P.O. Box 670973 Email: info@ymja.org
Marietta, GA 30066 Website: www.ymja.org

Important: Please see other side

When is the Retreat?

Registration is open on Friday, September 11, 2009 from 6:00pm until 8:00pm. The retreat will end Sunday, September 13th at 1:30pm. Please eat dinner before arriving at registration on Friday evening.

Who can Attend?

Any young person between the ages of 13-21. Also, any senior citizen over the age of 104.

Where is the retreat Located?

Back by popular demand, we will be returning to Camp Dudley, which is located in the beautiful Wenatchee National Forrest of central Washington. In addition, Camp Dudley is conveniently located about two and half hours southeast of Seattle and three hours southwest of Spokane. A map with detailed directions will be sent to you upon receipt of your completed registration.

How much does the retreat Cost?

The cost for the entire weekend is \$124 for early registration and \$154 for late registration. In addition, there is a \$10.00 membership fee for those that have not yet paid their 2009 YMJA Membership Dues. After September 13th, registration for the retreat will be \$5 (of course, you will have missed the retreat). Please note: all fees are non-refundable.

When is Registration Due?

Early registration must be received by **August 21, 2009**. Late registration must be received by August 28, 2009. There is no onsite registration, unless you call the YMJA office first. Register before August 21st and save \$30!

Where will we be Sleeping?

You will be staying in a chaperoned lodge on the campgrounds. There are separate accommodations for ladies and gentlemen. You will have a bed, but you must bring your own linens.

What does the registration Include?

Registration fees include housing, all meals, beginning with breakfast on Saturday, onegs and activities.

P.O. Box 670973
Marietta, GA 30066



Revive!

YMJA Youth-Only Retreat
Northwest Region



Are you a young person
between the ages of 13-21?

*Have we got a
weekend for you!*

Yakima, Washington
September 11-13, 2009





Revive!

Isaiah 57:15

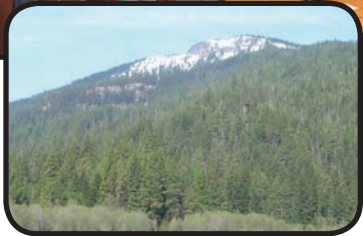
*I live in the high and holy place but also with the broken and humble, in order to **revive** the spirit of the humble and **revive** the hearts of the broken ones.*

Activities include, but are not limited to:

- > Zybogne
- > Revolutionary Praise and Worship
- > Life-changing Messages
- > Sports Opportunities such as Basketball, Volleyball, and Horeseshoes
- > Natur Hikes & Boating on the Lake
- > Interactive Games
- > And, of course, Food, Fun & Fellowship

Class Titles:

- Revive* the Meek *Revive* the Spirit
- Revive* the Broken *Revive* the Heart



If you are a youth leader interested in chaperoning, please contact info@ymja.org

Weekend Guest Speaker:
Matthew Krainess



Matt is a native of Akron, Ohio, and was born into a family with a Reform Jewish background. He grew up knowing that he was Jewish, but attended a non-denominational church to be with friends and receive Biblical teaching. Since childhood he has believed that Yeshua (Jesus) is the Messiah sent to the Jewish people. In 2002, Matt joined Shores David Messianic Synagogue in Tampa, Florida, where he served as the Director of Youth and College Ministries for six years. Since that time he has helped to establish Derech Achat (a youth group focusing on teen ministry), a 20-Something's group, and Ner Tamid (an on-campus college ministry). He has also helped plan regional and national Messianic youth conferences, including the Messiah conference, which he credits with having an instrumental place in his spiritual progression.



Camp Dudley
Yakima, Washington

YOUTH RETREAT Northwest Region

The Young Messianic Jewish Alliance is hosting a youth retreat for young people between the ages of 13-21. This retreat is packed with activities, teachings and events that inspire, encourage, uplift and spiritually strengthen you!

And it's incredibly fun!!!

Special speakers will deliver power-packed messages to teach and challenge you to step up to the next level!

Return your registration form **SOON** to reserve your place.

The YMJA is a subsidiary of the



and is a sister organization of the



Come and join us
for a weekend that will
transform your life!

Parent / Guardian Consent Form

I, _____ give permission for my (son/daughter) _____ to participate in the YMJA NW Youth-Only Retreat conducted on September 11, 2009 through September 13, 2009 under the direction and authority of the Young Messianic Jewish Alliance.

I affirm that my child is in good physical condition and has not had any serious illnesses or operations since his/her last health examination.

Emergency Medical Authorization: I hereby authorize any adult leader of this retreat to act as my agent in fact, to approve any medical or dental treatment for my child as required by emergency. I also authorize any adult leader of this retreat to take any corrective action that may be necessary in order to protect the emotional, social or physical welfare of my child. If the retreat leaders deem it necessary to send my son/daughter home for any reason, I understand it will be at my expense.

I hereby agree to release, hold harmless and indemnify, the Young Messianic Jewish Alliance and the Messianic Jewish Alliance of America, including any staff, employees, administration, affiliates, volunteers and participants of any kind from any claims for damages or money whatsoever arising out of the above referenced trip.

I also understand that the following rules as stated below are to be followed at all times.

1. The YMJA schedule/rules are to be followed at all times and deviation from that schedule will only be allowed per the Ministry Director's permission.
2. At no time shall a teen be in a room belonging to the opposite sex.
3. Alcohol is strictly prohibited on the retreat property. Any violations of this rule will result in dismissal from the retreat at the violator's expense and the banning of said violator from future YMJA conferences.
4. Illegal drugs of any kind are strictly prohibited and discovery of such will result in dismissal from the retreat at the violator's expense and the banning of said violator from future YMJA conferences. Criminal action can be taken by the State of Washington.

Parent/Legal Guardian Signature _____ Date _____

Address _____

City _____ State _____ Zip _____

Telephone Number(s) _____

Insurance Carrier: _____

Name of Company _____ Telephone Number _____

Policy number _____ Agent _____

Please list any medications taken by the retreat participant:
