



CHRISTIAN CHURCH IN OHIO

DISCIPLES OF CHRIST

*A covenant network of congregations in mission:
We are the Body of Christ gifted and called in covenant together as Disciples of Christ
to be centers of transformation on the new mission frontier of our own communities*



United Disciples Youth Winter Retreat

For High School youth in grades 9-12

CAMP CHRISTIAN, MARYSVILLE

February 13-15, 2026

Please print all information except where a signature is required.

\$115 - Registration (Paid through Feb. 8th)

\$130 – Late/Onsite Rate (Paid Feb 9th or later)

**Scholarships are Available! Register at www.ccinoh.org or return check and registration to:
Christian Church in Ohio 10335 Maple Dell Rd., Marysville, OH 43040**

Name _____ Youth or Adult _____

Mailing Address _____

City _____ State _____ Zip _____

Gender _____ Birth Date ____/____/____ Current Grade in High School _____

Home Phone number (_____) _____ Parent/Guardian Cell (_____) _____

Email _____ Parent Email _____

Church Name _____ City _____

The Christian Church in Ohio [Refund Policy](#) is in effect for this event.

EXPECTATIONS:

1. Stay at Camp Christian from Friday evening to Sunday morning
2. Attend all sessions
3. No visitors, no commuting and no late arrivals
4. NO ALCOHOL, ILLEGAL DRUGS, or WEAPONS
5. Observe quiet times and be in cabins by 11:30 each night. Lights out at midnight
6. We are a Christian group and shall live by Christian standards
7. EXPECTATIONS for adults are the same as for young people
8. Sleeping quarters that are not yours are off limits
9. NO SMOKING OR VAPING.
10. Youth **who drive** are required to **turn in their automobile keys** upon check-in. This is to assure the protection of the vehicle while at Camp Christian
11. Have a good time and grow in your faith

Please note Camp Christian will not be responsible lost or stolen items or money.

I agree to follow these expectations as a participant in the CYF Winter Retreat:

(Signature of participant)

(Signature of parent or guardian)

For Registration or Scholarship questions, please email ccio@ccinoh.org.

FILL OUT THE PARENTAL & MEDICAL FORM ON THE NEXT PAGE FOR ALL YOUTH BEFORE RETURNING

United Disciples Youth Winter Retreat Parental & Medical Form

Name of Youth Attending _____

Emergency Contact Phone #(s) _____

Emergency Contact Full Name(s) _____

Dietary Concerns _____

FOR PARENT/GUARDIAN OF ALL YOUTH TO COMPLETE

State law requires your consent for medical treatment and procedures as deemed necessary in case of an emergency. Please read the form carefully and fill it in completely. Ask about anything that you do not understand.

I, _____ do hereby authorize emergency treatment by a qualified physician for my child
_____ if needed during the **Youth Retreat at Camp Christian February 13-15, 2026.**

- I acknowledge that in case of an emergency during this period, my child will be taken to the nearest hospital. _____ **Initial Here**

Allergies _____

Medication now being taken _____

Anything else we should know about _____

All the information I have provided above is accurate to the best of my knowledge.

Parent or Legal Guardian's Signature

Please note, if completing electronically, a typed signature is acceptable.

United Disciples Youth Winter Retreat 2026 Information Sheet

What to Bring:

Warm clothes for two days

Coat and hat for cooler weather.

Bible & Pen/Pencil

Bedding (sleeping bag, pillow, or sheets, blanket, and perhaps an extra blanket (Buildings are heated))

Towels

Toiletries as needed

A willingness to meet new people and share God's love

Check-in will begin at 7:30pm

Closing Circle will be at 11:00am

Pick up at the Monroe Lodge at 11:30am

Location: (GPS or Google)

10335 Maple Dell Rd., Marysville, Ohio 43040