

Have you ever finished, mastered, and accomplished something and then said, "What's next?" This is the theme for our Camp this year. Come prayed up, worshipped up, with a heart to seek our wonderful Lord for What is Next!

Theme scripture Joshua 1:9.

-Pastor Terry

Date & Time (*subject to change)

Starts: Wednesday, October 9, 2024

Registration: 4-6pm

Meeting 7pm

Thursday-Friday, October 10-11, 2024

Prayer: 8am

Meeting: 9am

Dinner: 5pm

Prayer: 6pm

Meeting: 7pm

Saturday, October 12, 2024

Prayer: 8am

Meeting: 9-11am

Prepare for offerings at evening services.

Cost

\$25. non-refundable registration fee due by 5/12/2024 to reserve your place @ camp.

Early Bird discount: \$113 due by 7/14

\$112 due by 8/18

Total with reg.: \$250.

Normal fee: \$255 due by 8/18

Total with reg.: \$280

Includes: room, gift, sessions

Dinner at the café included Thursday & Friday night

(Breakfast, snacks & lunches are on you)

What to Bring

Warm clothes. (Bedding & towels provided.)

Bible, something to write with

Toiletries

Food

Fill out registration form & waiver, → detach & send with your payment to:

KONA FAITH CENTER

ATTN: Women's Camp

P.O. Box 385

Kealahakua, HI 96750

Ph.# 323-3788

Keep this portion with all the information so you don't miss out! Thank-You. :-)

Detach this portion on dotted line and hand in or mail to church. Thank-You.

KONA FAITH CENTER, INC.

ACCIDENT/INJURY RELEASE, WAIVER OF LIABILITY, INDEMNITY AGREEMENT, AND ASSUMPTION OF RISK

Name of Event: Women's Camp KMC

Date of Event: October 9-12, 2024

Time: 4pm Wednesday—noon Saturday

Place: Kilauea Military Camp (KMC)

1. I sign this waiver voluntarily with the understanding that I cannot participate without agreement to the terms and conditions that follow. As a parent or guardian I sign for my minor child under 18.

2. I shall conform to all applicable policies, rules, regulations, and standards of conduct established by the State/County of Hawaii, and Kona Faith Center, Inc. and will not participate in any illegal activity.

3. I shall accept termination of my participation in this event if I fail to maintain acceptable standards of conduct as established by Kona Faith Center, Inc. and the State/County of Hawaii.

4. **In consideration of my participation in Women's Camp KMC and other valuable considerations, the receipt of which is acknowledged, I hereby accept all risk** of my health and of my injury or death that may result from such participation and I hereby release, waive, discharge and covenant not to sue Kona Faith Center, Inc., their directors, officers, employees, volunteers, and agents (hereinafter referred to as "Releasees") from all liability to me, my personal representatives, assigns, heirs, next of kin or anyone else for any loss or damage in any claim or demands therefore, on account of property damage, personal injury or death, whether caused by the negligence of the Releasees or otherwise, arising out of any activity related to this event, including travel to and from this event to the fullest extent permitted by law. **Initial _____**

5. Kona Faith Center, Inc. Releasees are not responsible for the administration of any medications to the Participant during this event. The Releasees are not responsible for any adverse reactions that may occur from taking any personal medications.

6. I agree to indemnify, save and hold harmless the Releasees and each of them from any loss, liability, damage or cost that they may incur due to my participation in this event, including travel to and from this event.

7. I hereby assume full responsibility and risk of bodily injury, death or property damage arising out of participation in this event as named above. I understand that there are certain risks that may occur both known and unknown including but not limited to: exposure to personal injury; accident or illness; forces of nature. **Initial _____**

8. I further agree that the foregoing Release, Waiver, Indemnity Agreement, and Assumption of Risk is intended to be as broad and inclusive as possible, yet there may be unforeseen risks and will not hold the Releasees responsible in any manner.

9. I hereby grant permission for the performance of any first aid and/or emergency medical treatment that may be required in the case of an accident wherein I am rendered unconscious or unable to approve of the required medical treatment. In the event that I become the victim of an accident I will hold harmless from any liability or negligent actions which may arise in connection with the search and rescue, stabilization, evacuation, transportation, and emergency care I receive while secondary aid resources are being sought.

10. I hereby agree to permit Kona Faith Center, Inc. agents, employees, volunteers, directors, officers, and other guests to take photographs (still or live) and make film records of this event without further recourse. I understand such photographs and/or film may be used for commercial and/or promotional purposes. **Initial _____**

11. **I have read and voluntarily signed the Release, Waiver, Indemnity Agreement, and Assumption of Risk. Initial _____**

This event as named above includes activities involving risks or injury. I understand that activities will involve participation in exercises that are, by their nature, physically demanding and will subject the participant to stress, anxiety and possible hazards, not all of which can be foreseen. In this event the following activities will be offered.

Please initial the activities that are acceptable to participate in:

1. Prayer / Slain in the Spirit Initial _____

2. All free time activities Initial _____

3. Driving to, during, & from Kilauea Military Camp Initial _____

I hereby acknowledge & state that my participation in this activity is entered into as a free & voluntary act with full & complete knowledge of the risks involved. Initial _____.

In addition, in case of accident or need for medical attention, I give permission to Kona Faith Center, Inc. representatives to take named participant to a doctor and/or emergency facility. It is understood that all expenses for treatment provided will be borne by the parent, guardian or the participant with no cost to Kona Faith Center, Inc.

Print Participant Name _____

Date of Birth _____

Address _____

Phone _____

Email _____

Emergency Contact _____

Phone _____

If legal parent (legal guardian) is not available contact:

Emergency Contact _____

Phone _____

Family Physician _____

Phone _____

Insurance Carrier _____

Policy Number _____

Group Number _____

Any Medical History, allergies, drug reactions, etc that may be needed for medical treatment _____

Participant Signature _____

Kona Faith Center should be informed immediately of any changes in the information. This agreement is valid unless revoked in writing by the person(s) who sign it.

Minor Participant:

Signature of both Parents/Legal Guardians if possible:

I agree to discuss the rules with my child as a condition of participation in this event. **Initial _____**

2024 Women's Gathering @ KMC

Registration Form

To reserve your place @ the conference please fill out in entirety, front & back, detach and submit to Kona Faith Center by :

Sunday, May 12, 2024 with \$25.00 non-refundable registration fee.

Early Bird fee schedule: (total including registration fee is \$250)

\$113 due no later than 7/14/24

\$112 due no later than 8/18/24

Normal fee: (total including registration fee is \$280)

\$255 due no later than 8/18/24

Name _____

Address _____

Phone # _____

Method of Payment

Cash _____ Check _____ (payable to Kona Faith Center)

Credit card payments can be made online (konafaithcenter.org/womens-camp)

Payment may be submitted by mail or by dropping it off at the church office. Please ensure it is in a properly marked envelope for identity security. Please **do not** put in offering bucket.

-Thank You
Pastor Terry

Kona Faith Center phone #: 323-3788
ATTN: Women's Camp
P.O. Box 385
Kealahakua
HI, 96750

Kona Faith Center, Inc.

Women's Gathering

@Kilauea Military Camp



**Have I not commanded you?
Be strong and courageous!
Do not tremble or be
dismayed, for the Lord your
God is with you wherever
you go.**

-Joshua 1:9 NASB

Wednesday, October 9, 2024
to
Saturday, October 12, 2024

\$280 conference fee (\$250 early bird)