



**MARCH 25-27 2010**  
VINEYARD COLUMBUS  
GRADES 6-12  
REGISTER BY **MARCH 7**

**\$75 for room, board & transportation**

## 6th-12th graders

Oasis is a weekend Youth Conference for churches in the Midwest Region. Oasis happens at the Columbus Vineyard Church in Ohio.

This conference offers students an opportunity to engage in worship, various teachings, and lots of fun activities with other students. Each night, we will be staying in host homes of families from the church (guys and girls separate). \$75 covers the cost of the conference and transportation. Please bring extra cash for 4 fast food meals.

Parents, if your students are attending this event, \$75 and permission slip are due by March 7<sup>th</sup>. Please make checks payable to **Vineyard Church of Milan.**

If you have questions, contact Jon Bartholomay at (734) 730-1687 .

### WHAT TO BRING:

- cash for 4 fast food meals
- clothes for 2 days
- sleeping bag
- towel, soap & shampoo
- pillow
- toiletries (toothbrush, toothpaste, deodorant, etc.)

**meet @ the Vineyard  
Youth House @ 3:00pm on  
Thursday, March 25<sup>th</sup>.**

We will be driving vans to and from Columbus, Ohio.

**Parents: We will aim to be back at the Youth House at 6:00 PM on Saturday.** If this changes, your child will call you.

[www.milanvineyard.org/youth](http://www.milanvineyard.org/youth)





**MARCH 25-27 2010**  
**VINEYARD COLUMBUS**  
**GRADES 6-12**  
**REGISTER BY MARCH 7**

Oasis is a weekend Youth Conference for churches in Michigan, Indiana, and Ohio. Oasis happens at the Columbus Vineyard in Ohio. Register by sending this permission slip and money (checks payable to **Vineyard Church of Milan**, put "Oasis" on memo line) by **March 7<sup>th</sup>** to:

**424 Hurd Street**  
**Milan, MI 48160**

Oasis 2010

name

male

female

address

phone  grade

Payment enclosed (\$75)

Scholarship application attached

### permission to participate, release of liability, and medical release

I(we) \_\_\_\_\_, parent(s)/guardian(s) of \_\_\_\_\_, give permission for the above named child to participate in the Oasis Youth Conference, led by the Vineyard Church of Milan, its staff, and representatives. I release Vineyard Church of Milan, its staff and sponsors, from responsibility and liability for any injury or illness that my child may sustain during this activity. In the event of an emergency, I authorize the youth staff or sponsors to consent to any emergency medical treatment such as: X-ray examination; medical, dental or surgical diagnosis; treatment; and hospital care advised and supervised by a physician, surgeon, dentist or other medical professional (as appropriate) licensed to practice under the laws of the state where the services are rendered, either at a doctor's office or in any hospital. I expect to be contacted as soon as possible.

emergency contact phone number(s) \_\_\_\_\_

signature \_\_\_\_\_ date \_\_\_\_\_

# Scholarship Application

## for Oasis 2010

(to be completed by parent or guardian)

We don't want a lack of funds to keep your child from attending an event. Oasis Youth Conference is an incredible experience and we want to do everything we can to make a way for your child to come. Please complete the following application, as this helps give us a fuller awareness of your needs and assists us in being good stewards of our available financial resources. We will make every effort to help you, and most often, we can provide some form of scholarship for your child; however, we are limited in the amount of scholarships we are able to offer. All information provided below is confidential.

### Contact Information

Parent Name(s): \_\_\_\_\_

Student Name: \_\_\_\_\_ Phone: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

### Scholarship Information

1. Are there any special circumstances in your family that have resulted in your need for financial assistance (loss of job, illnesses, financial burdens, etc.)?  
\_\_\_\_\_  
\_\_\_\_\_

2. How much are you able to pay for this event?  
 Half (\$40)  Quarter (\$20)  Other \$ \_\_\_\_\_

3. Would you be able to make an additional payment(s) after Oasis?  
 yes  no  
If yes, how much? \_\_\_\_\_ By when? \_\_\_\_\_

\_\_\_\_\_  
(parent's signature)

\_\_\_\_\_  
(date)

#### For Office Use Only:

Date received: \_\_\_\_\_

Amt paid: \_\_\_\_\_

Total scholarship: \_\_\_\_\_

Approval: \_\_\_\_\_

Total Paid back: \_\_\_\_\_