

WINTER SNEAK 2009

Sponsored by:



Quaker Haven
CAMP



Nick Embry—
Director



Pat Byers—
Music



Aaron Hughs—
Director

WINTER SNEAK 2009

Feb. 6-8

Uncut, Unprogrammed & Unreal!

Quaker Haven Camp

Cost: \$95 Grades 7 to 12

WINTER SNEAK 2009



Have you ever sat back and asked yourself, "You know what self, what would Winter Sneak look like if Nick and Aaron went completely out of their minds planning Winter Sneak. What if they were unpredictable, or unconventional or even un...sane.?" Ok, here's the deal, this year's Winter Sneak is all that and a bag of chips. You want

games you've never played before? You've got it. You want some of QHC's classics? Of course, you've got that as well. You want Aaron and Nick ice skating to "Waltzing Matilda?" Keep dreaming cause no one wants that. You want a weekend that will rock your face off? Then come to Winter Sneak 2009 because this year's WS is full of the classics, full of new games and will challenge you to live out your faith in an unpredictable and unconventional way.



WHAT SHOULD I PACK? Bedding, pillow, lots of warm clothes, Bible, notebook, writing utensils and tons of SNOW CLOTHES!!!!!!
WHEN CAN I ARRIVE & WHEN IS 'SNEAK' OVER? Registration begins at 7:00 pm on Friday, February 6th in the QAC Lobby and ends by noon on Sunday February 8th.

WHAT IS THE COST? The registration fee is \$95 per person
WHERE DOES ALL OF THIS TAKE PLACE? Quaker Haven

Camp (you can use Google maps to find it)!

WHO IS LEADING WORSHIP? Pat Byers and the JAM Band!!!
WHO IS SPEAKING? John Howenstine. John is the youth pastor at Goshen First Brethren and world renown for his abilities at chilling.
WHAT SHOULDN'T I BRING? Absolutely NO MP3 PLAYERS and/or CELL PHONES! We don't want to even see them!!!

REGISTRATION DUE BY JANUARY 30th

MALE/FEMALE (Circle One)

Name _____

Address _____

City _____

State _____ Zip _____

Home Phone() - _____

Church belonging to _____

Email _____

FOR PARENTS:

I agree to absolve IYM Youth Ministries from any liability beyond the limits of insurance provided. I also authorize representatives of IYM Youth Ministries to sign in my stead for emergency medical treatment of my registered child after reasonable attempt to contact me has been made.

_____ / _____ / _____

Parent/Legal Guardian Signature Date

(Please note: Students with no guardian/parental signature will be withheld from activities until consent can be signed for from a parent and/or adult chaperone.)

Clip and Mail this form with your \$95 to:

IYM c/o Winter Sneak
4715 N Wheeling Ave
Muncie, IN 47304