

## MEDICAL EMERGENCY FORM

Must complete one for each child under 18 – optional for adults.

Name \_\_\_\_\_ Age \_\_\_\_\_

Can participate in full physical activity?

Yes \_\_\_\_\_ No \_\_\_\_\_

Date of last tetanus shot: \_\_\_\_\_

Please comment on any behavioral or health issues (including allergies) that would help the children's program leaders:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In event of emergency call:

Name \_\_\_\_\_

Phone \_\_\_\_\_

If above cannot be reached please use your best judgment – includes permission to authorize medical treatment or surgery if necessary.

Other –Specify \_\_\_\_\_

Health Insurance Company \_\_\_\_\_

\_\_\_\_\_

Policy Number \_\_\_\_\_

Phone Number \_\_\_\_\_

**SPONSOR INFORMATION:** Required for those under 18 attending without parent(s).

Sponsor's Name \_\_\_\_\_

Monthly Meeting \_\_\_\_\_

***It is understood that the sponsor acts in loco parentis.***

**Parent/Guardian Signature:**

\_\_\_\_\_

Date \_\_\_\_\_

## Adult Program:

Spring 2016 Quarterly seeks to build community, celebrate diversity, encourage inclusion, and create space for spiritual growth, empowerment, and opportunities for change through intergenerational, adult, and children's programming.

Gender and sexuality are rich, complex, and fluid spectrums that impact who we are and how we perceive, and operate in, the world.

In our Adult Program, we'll:

- Inquire into gender and sexuality with openness and curiosity, and without judgement;
- Listen carefully and respectfully to one another, and create a shared space to honestly address our shared testimonies in the context of inclusivity;
- Take part in activities that will assist us in enacting change within our individual and shared spheres of influence to increase true inclusivity for Friends of marginalized genders and sexualities.

Please join us as we look within ourselves, reach out to one another, examine our world/s closely, listen to one another's truths carefully, and joyfully come together as a rich faith community.

**The Children's Program** will complement the adult theme's emphasis on recognizing and creating spaces ripe for inclusivity.

## Central Illinois Lutheran Camp

**Association (CILCA).** Camp CILCA's 210-acre wooded campus lies 12 miles SE of New Salem State Park, 7 miles N of Springfield on route 29, and 4 miles W on Andrew Road (Cantrall Creek Rd). From I-55, take Exit #105 (Sherman) and travel S to the first traffic light, turn right (W) and go 7.5 miles to camp. See [www.cilca.org](http://www.cilca.org) for a map, Google 4124 Camp CILCA Rd, Cantrall, IL 62625 or call (217) 487-7497.

## Program & Registration for the Blue River Quarterly Meeting

of Illinois Yearly Meeting  
April 8 – 10, 2016

## Making Space and Creating Change: Nourishing the Seed of Inclusivity

"... Walk cheerfully over the world answering that of God in every one."—George Fox, 1656

"The heart is like a garden. It can grow compassion or fear, resentment or love. What seeds will you plant there?"—Jack Kornfield, *Buddha's Little Instruction Book*



**Facilitator: Barbara Harroun**

Joyfully held at Camp CILCA, 4124 Camp CILCA Rd, Cantrall, IL 62625 (NW of Springfield, IL).

**Children's Program & Outdoor Play** (weather permitting) graciously provided by Champaign-Urbana Meeting.

## BRQ SCHEDULE

All meals and adult programs/meetings will be in the Christian Growth Center [CGC].

Youth program will be in the Retreat Center during adult program times. **Parents are responsible for their children at all other times.**

### Friday, April 8th

5:00 – 7:30 Registration/Brown Bag Supper  
7:30 – 9:00 - Informal Fellowship

### Saturday, April 9th

7:15 – Early Worship  
8:00 – Breakfast (Please arrive on time)  
9:00 – 12:00 - Wee and Young Friends Program at Retreat Center  
9:15 – 11:00 - Making Space for Inclusivity: Listening to Each Other's Truths  
11:15 - 11:45 - ILYM Planning  
Noon – Lunch (Please arrive on time)  
1:00 – 3:00 - Free Time  
3:00 – 5:00 - Wee and Young Friends Program at Retreat Center  
3:15 – 4:45 - BRQ Business (Please bring State of Society Reports)  
5:00 – 5:30 - Young Friends will come to share their experiences  
5:30 – Dinner (Please arrive on time)  
6:30 – 8:00 - Intergenerational Service Project for Chicago-area LGBTQIA homeless youth  
8:00 – Bonfire with singing & S'mores

### Sunday, April 10th

8:00 – Breakfast (Please arrive on time)  
9:00 – 11:15 - Wee and Young Friends Program at Retreat Center  
9:15 – 10:15 - Enacting Change Through Spheres of Influence  
10:30 – 11:30 - Meeting for Worship  
11:15 – Children join Worship  
12:00 – Lunch (Please arrive on time)  
1:00 – Clean up and goodbyes

**Donation Request:** We'll make kindness kits of necessary items to benefit LGBTQIA homeless youth in Chicago. If you are interested in donating items for these kits, please contact Barb Harroun via [barbharroun@yahoo.com](mailto:barbharroun@yahoo.com).

**Volunteer Signup:** Friends who are able are encouraged to sign up for volunteer activities (assisting with the children's program, Sunday cleanup, etc.) at on-site registration.

**Housing Costs:** Christian Growth Center (CGC) has 14 bedrooms with 1 double bed & 1 set of bunk beds, with a bathroom. Cost is \$60 per room/night. Bedding provided. Mattresses are available. Retreat Center has Men's Dorm & Women's Dorm, and a half-bath on the first floor. Family Dorm and shower/bathrooms in the basement, \$17 adult/night. *Bring your own bedding.*

**Meal Costs:** Breakfast: \$6; Lunch: \$7; Dinner: \$8. Sunday noon is a Dinner. BRQ absorbs the Food & Housing costs of participants under age 19. Please donate as you can to cover them. All meals will be in the Christian Growth Center.

**Alternative Meals:** If anyone wishes to prepare their meals in the Retreat Center and has questions, call Bobbi Trist at 217-766-1335. We have use of the small kitchen with stove, fridge, and dishes.

**Possible Things to Bring:** Snacks to share, flashlights, hiking shoes, towel, fishing pole & tackle, organization displays, games and toys, musical instruments, and copies of music - especially Rise Up Singing, a sense of humor, a modicum of patience, and love to share

### Registration:

Please send by **March 31** to Beth Schobernd Carpenter, [beth.schobernd@gmail.com](mailto:beth.schobernd@gmail.com)  
OR  
2664 Chandler Drive; Normal, IL 61761

**Bring or send a medical emergency form for each person under 18!**

## REGISTRATION FORM

Family Names: \_\_\_\_\_

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

Phone: (\_\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Monthly Meeting: \_\_\_\_\_

Date Arriving: \_\_\_\_\_ Departing: \_\_\_\_\_

Special Needs: \_\_\_\_\_

**\* Please indicate: CGC for bedroom, M- Men's Dorm, W-Women's Dorm, F-Family**

Name	Age	Housing*

Nights in CGC x # room x \$60= \_\_\_\_\_  
Nights in Dorm x # adults x \$17= \_\_\_\_\_  
Adult Breakfasts x # adults x \$6= \_\_\_\_\_  
Adult Lunches x # adults x \$7= \_\_\_\_\_  
Adult Dinners x # adults x \$8= \_\_\_\_\_  
Registration\* x # adults \$15-30= \_\_\_\_\_  
Other Donations \_\_\_\_\_  
Total included \_\_\_\_\_

*\*Registration is \$15 to 30 per adult on a sliding scale. No one should hesitate to attend because of financial reasons. Please just pay the amount you can afford, and join us.*

**Make checks payable to Blue River Quarterly.**