2025 Senior Retreat

What to Bring and Basic Rules



WHY ATTEND THE SENIOR RETREAT? All senior class members are expected to attend the retreat*. Our desire is to take the time at the beginning of the school year to bond as a class and to dedicate the year to the Lord. Basically, these are the best two days to kick off your senior year with your class—you really don't want to miss it!

We will also be planning and working on many senior-related events while at the retreat, as well as bonding as a class. All students will ride the bus that leaves campus at 1:00 pm on Thursday, September 11th. All students will return to campus by 3:00 pm on Friday, September 12th. (No leaving early or coming late except in extenuating circumstances.) All food, snacks, and drinks are provided.

What to Bring

- ✓ Good Attitude
- ✓ Cell Phone
- ✓ Toiletries
- ✓ Refillable Water bottle
- ✓ Extra Clothing: Play Clothes and Weather-Appropriate Clothes
- ✓ Bug Spray
- ✓ Pillow and Sleeping Bag
- ✓ Card/Board Games
- ✓ Football, Soccer Ball, etc.
- Outerwear: Gloves, hats, windbreaker, and hiking boots/tennis shoes

Selected Rules

- No guys in girls' cabins or girls in the guys' cabins
- 2. No switching cabins
- 3. No corrupt communication
- 4. No leaving the camp area without permission
- 5. MCA Honor Code and all school rules apply

~ After a warning, any chaperone has the authority to issue detentions upon the first violation of any of the rules above or otherwise deserving behaviors

Total cost is **\$130.00** per student (which covers the cost of the retreat and a variety of senior year events, including Senior Day Away). You must turn in your permission slip to High School Administration by Friday, September 5th. This fee will be charged via FACTS through incidental billing.

*If for some reason there are extenuating circumstances, please reach out to our Upper School Assistant Principal, Joshua Agrimson (joshua.agrimson@mcamustangs.org) by no later than Wednesday, September 3, 2025. Students having to work is not an acceptable rationale for not attending the retreat; please request it in advance.

PERMISSION SLIP MARANATHA CHRISTIAN ACADEMY 2025 SENIOR RETREAT September 11-12 Camp Ihduhapi

has my permission to attend the 2025 Senior Retreat at	:
Camp Ihduhapi on September 11-12, 2025.	
I understand students will be transported to and from Camp Ihduhapi by an MCA bus. Permis slips and final payments (Fees are charged via FACTS) are due by Friday, September 5*. Pleas in to High School Administration. Total cost is \$130.00 per student, which covers both the ser retreat <i>as well as</i> a variety of senior events including Senior Day Away in May.	e turn
Phone numbers we can reach you at in case of emergency:	
Home:	
Cell:	
Other:	
Signature of Parent/Guardian Date	
Please List anything below that MCA Staff in charge of this event need to know about your student (i.e. allergies, sensitivities, intolerances, etc.). This form will remain confidential, but want to ensure your student has the best experiences possible for their senior year. Thanks!	

^{*}Please note that once payments are submitted, they are non-refundable. All payments are immediately applied to trip costs.

MEDICAL TREATMENT CONSENT FORM MARANATHA CHRISTIAN ACADEMY 2025 SENIOR RETREAT

I,, am the parent/legal guard	dian of	, who is
years old, resides at	and attends Mara	natha Christian Academy.
I give permission for a Maranatha representative to administe permission for a licensed doctor, physician, or paramedic to a he/she becomes sick or injured during the retreat, and to do that a Maranatha representative will endeavor to contact me any member of the school personnel responsible if efforts to	administer the necess so without having to prior to any treatmer	sary aid to my child in the event that wait until I am contacted. I understand at if possible; however, I will not hold
Parent Name (Printed)	Parent Signatur	e Date
Please provide the following information:	Home Phone:	
	Father's Cell:	
	Mother's Cell:	
Emergency contact information (parents unreachable):	Name:	
	Relation:	
	Phone:	
Medical Insurance Company:	_	
Allergies to Medication or Other Allergies?		
Does Your Child use an Epi-Pen? If Yes, For What?		
Does your child have any allergies?		
Medications: Please indicate any medications that your child Include the reasons for these medications.	is on and any medica	tions they plan to bring on the trip.
Medical Conditions: Please provide information about any me allergies, bone or joint problems, etc.)	dical condition regar	ding your student. (Respiratory, cardiac,
Insuranc We recognize that Maranatha Christian Academy does not ca fieldtrips or events. We the undersigned hereby release Mara connection with injuries suffered by the student named above	rry insurance to cove natha Christian Acad	
Parent Name (Printed)	Parent Signatur	e Date

MARANATHA CHRISTIAN ACADEMY STUDENT BEHAVIOR CONTRACT & PERMISSION SLIP 2025 SENIOR RETREAT

I give permission for my child to participat	e in the 2025 Senior Retreat on Septe	mber 11-12.	
I (student)	understand that my		
participation in an MCA school trip binds n	ne to all existing school policies and r	ules.	
The expectations of MCA students are:			
Students will be responsible for the	mselves and use of time.		
Students will show respect for God, others, and themselves.			
Students will show respect for pers	onal and school property.		
Students will use self-control and g	ive their best effort.		
Students will support the MCA scho	ol community with a positive spirit.		
Students participating in MCA-sanctioned policies and procedures as defined in the policies and procedures are subject to the Student/Parent Manual.	Student/Parent Manual. Students wh	o violate these	
The High School Principal, Assistant Principsent, at the parents' expense, to escort a sinfraction.		-	
Infractions that occur for seniors may resustudents could be required to meet discip diplomas. All infractions will be made know Principal. Upon return, the school will detended to the with school manual violations.	linary conditions in order to receive e wn directly to the High School Princip	ither transcripts or oal and Assistant	
Student Name (Printed)	Student Signature	Date	
I/Westudent have read, understand, and agree Agreement. I/We also understand it may b our child is traveling internationally, in cas	e advisable to have a current passpo	ct and Permission	
Parent Name (Printed)	Parent Signature	Date	