

APPLICATION FOR BIC WEEKEND

(updated form 12/10/24 DISCARD ALL OTHERS!!)

_____ Teens (Ages 15-18, still in High School)

_____ Young Adults (Ages 18-24, never married)

BIC (Believers In Christ) is a three-day experience of renewal, learning, and sharing for the groups mentioned above in the atmosphere of a Christian community. Everyone experiences it differently. It is not intended to help solve deep-seated personal problems, but it is designed to help youth work toward a Christian way of life with community support.

You and your parent or guardian should complete this page and return it to your adult sponsor as soon as possible, along with a \$25.00 check for the deposit. Checks should be made payable to B.I.C. Your adult sponsor will complete the second page and then send it to the Community Registrar. Applications submitted without registration deposit will be returned to the adult sponsor. In order to provide the best possible experience, please return this registration application no less than two weeks prior to the weekend.

All of the information below is needed to place you on a BIC Weekend. Your \$25 registration deposit (non-refundable) will be applied toward the total registration cost for the weekend, which is \$90.00 (balance due at check-in). If you are in need of financial assistance for part of the cost of the weekend, you MUST indicate it on this application. This is an application form. Submitting it does not guarantee you acceptance. You may be placed on a waiting list, as a limited number of spaces are available. You will be notified of your acceptance within two weeks of receiving your deposit. Late applications will be handled as quickly as possible. If space is not available for the weekend requested, the registrar will contact the sponsor as to whether to hold or return the \$25 deposit. Notice: Camp Illiana is a tobacco free campus. Sometimes t-shirts are provided free of charge.

TO BE FILLED OUT BY THE CANDIDATE

Today's Date: _____

Name: _____ Name on Name Tag: _____

Mailing Address: _____ T-shirt Size (S, M, L, XL, XXL) _____

City / State / Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Male or Female (circle one, please) Date of Birth: _____

School you attend: _____ Grade: _____

Church you attend and what City? _____

Pastor: _____

What interests and activities do you pursue? _____

Do you require any special medication, special diet, or have any food allergies? _____

Has BIC and the follow-up meetings and group reunions been explained fully to you? _____

Why do you want to be involved in BIC, and what do you expect from it? _____

Do you require financial assistance for the weekend fee? _____ YES _____ NO

Your preferred date: _____ Alternate date: _____

Candidate signature: _____

I, the undersigned parent or guardian of the above candidate, consent to my child or ward participating in a BIC Weekend. I also authorize any adult BIC team member to act as agent for me and to consent to any medical or surgical treatment for my child or ward at a hospital, clinic, or doctor's office in the event of a medical emergency during the BIC Weekend.

Parent / Guardian Signature: _____

A parent or guardian must sign this form for anyone attending a BIC Teen Event.

Candidate's Emergency Medical Information:

Name & telephone number(s) of person to contact _____

Name & telephone number of family physician _____

Allergies to medications, foods, plants, etc. _____

BIC & Southwest Indiana Walk To Emmaus

ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

I, _____, HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH the BIC and Walk To Emmaus including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault. I certify that I am physically able to attend this event and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by BIC and Southwest Indiana Walk To Emmaus Board of Directors, Camp Illiana staff, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

In consideration of my application and permitting me to participate in this activity, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity,

THE FOLLOWING ENTITIES OR PERSONS: The BIC and Southwest Indiana Walk To Emmaus and/or their directors, officers, employees, volunteers, representatives, and agents, and Camp Illiana and/or their; directors, officers, employees, volunteers, representatives, and agents

(B) INDEMNIFY, HOLD. HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by negligence or otherwise.

I acknowledge that BIC and Southwest Indiana Walk To Emmaus and Camp Illiana along with their directors, officers, staff, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Participant's Signature

Date

Candidate's Name: _____

It is very important that the sponsor(s) complete all the information requested!

Sponsoring a candidate is both a joy and a responsibility! There are things you must do for your candidate before, during, and after the BIC Weekend experience. You should be praying and sacrificing for your candidate. Remember also that the BIC is not structured to solve deep-seated personal problems. It is designed to provide participants with the opportunity for a personal encounter with Jesus Christ. Notice: Camp Illiana is a tobacco free campus.

Adult Sponsor: _____

Mailing Address: _____

City / State / Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Church you attend and what City: _____

When and Where was your weekend experience? _____

Please tell us about your candidate so that the BIC experience may be even more meaningful.

Does the candidate have the physical and mental health needed to participate in the weekend? _____

If your candidate needs financial assistance for the weekend, will you be able to supply that assistance?

YES or NO (please circle one)

Are you willing and able to help your candidate into a reunion / sharing group? _____

Will you bring your candidate to the weekend and attend the services? _____

Is the candidate under any temporary emotional strain that might indicate that his/her participation should be postponed? _____

Have you sponsored a BIC candidate before? YES or NO (please circle one)

Adult sponsor signature: (required) _____

..... optional

Youth Sponsor: _____

Mailing Address: _____

City / State / Zip: _____

Home Phone: _____ Work Phone: _____ Email: _____

Church you attend and what City: _____

When and Where was your weekend experience? _____

Have you sponsored a BIC candidate before? YES or NO (please circle one)

Youth sponsor signature: (optional) _____

For registrar's use:

Deposit _____

Name on Check _____

Date received _____

Response date _____ Reply date _____

Send application promptly to:

B.I.C. Registrar

Matt and Lori Koerner

2104 Bedford Rd

Washington, IN 47501

SPONSORS – USE THIS LETTER TO INTRODUCE BIC TO WHOMEVER YOU MIGHT APPROACH ABOUT FINANCIAL ASSISTANCE (if needed) FOR YOUR CANDIDATE

Greetings in the name of Jesus Christ! As a member of the B.I.C. board, I have been asked to communicate a need and a request with you.

In case you are not familiar with BIC, our mission is to develop student leaders for Christ. Our community provides young people in the geographical area it serves (southwestern Indiana) with the opportunity to experience the love of Jesus Christ through weekend retreats. These weekend experiences expose young people to God's unconditional love and acceptance, and provides the opportunity for young people to commit their lives to Christ and / or to renew that commitment.

As you may know, our community sponsors three BIC weekends each year. These weekend retreats, known as Teens (for sophomore–senior high school students) and Young Adults (for those 18-24 & never married) are currently being held at Camp Illiana near Washington. It has been the practice of the BIC board and the community to allow anyone who wishes to attend this weekend retreat to do so, regardless of whether or not an individual can pay the registration fee that is imposed. As a result, our community has provided substantial financial assistance over the past three years, and many lives have been touched by this act of agape.

As you might imagine, providing this financial assistance became a financial burden on the community. Increased costs in food, facilities, and supplies needed for each weekend have severely reduced our community's financial resources. Steps have been taken to remedy part of the problem; registration fees for the weekend were raised (current cost is \$90); and the budget for each weekend has been revised so that it accurately represents the costs of the weekend. We constantly endeavor to be good stewards of the funds we receive, and by raising fees and revising the budget, we feel we are taking positive steps toward this goal. By taking these actions, however, we are fearful that we may discourage some young people from attending these weekends, because the fees will be more than they can pay. That is where your church or group comes into the picture.

Would you be willing to prayerfully consider providing financial assistance for those young people wishing to attend a BIC weekend but unable to afford the costs? Any amount would be appreciated. If you wish to contribute, you may do so in cash to the sponsor, or you may write a check to BIC for your chosen amount. The sponsor can then send the money to the community registrar, or bring the payment to the registration table at the beginning of the weekend.

Thank you for your consideration and prayer. May God richly bless you!

If you have any questions or concerns about this, you may contact any BIC Board Member listed on the Board Members Page at www.siwe.org.

Sponsoring Checklist

Sponsoring a candidate is both a joy and a responsibility! There are things that you must do for your candidate before, during and after the BIC weekend. This checklist has been designed to help you keep track of your responsibilities.

_____ Before submitting an application, pray about the applicant going on a weekend. Prayerfully consider the timing. Talk with the applicant's parents about the weekend.

_____ Submit the application in a timely manner. Sending in an application for a weekend that is only a few weeks away does not always allow enough time for the prayer needed for your applicant or the chance to collect agape.

_____ Check for financial need. It is up to **YOU** to make sure the fee for the weekend is paid. Check with the applicant and find out if financial help is needed. If you are unable to help financially, help the applicant find other sources to defray the costs. A cover letter is available with this application to present to the applicant's church which states the need for financial assistance.

_____ Stay in touch with the applicant. Check with the applicant to see when confirmation is received for the weekend. Continue to pray for your applicant.

_____ Start collecting personal agape. You may want to write a cover letter to send to family and friends to explain the reason for agape. Make sure that all personal agape is collected and brought to the campground when you bring the caterpillar. Please try to obtain 10 – 12 personal letters for your caterpillar. Please remember that **NO PERSONAL GIFTS or GIFTS LARGER THAN AN ENVELOPE** will be delivered to the caterpillars. If you would like to give your participant a gift, please wait until you have left the campground and are on your way home. Be considerate of the other participants who will not receive a gift and don't cause their feelings to be hurt. This would defeat the purpose of the weekend for all of the participants to feel loved. **DO NOT TAKE GIFTS TO YOUR PARTICIPANTS ROOM.** Other participants in their room may feel left-out or disappointed. We don't want that to be a distraction to what God has for them to receive.

_____ Make transportation arrangements. It is your responsibility to bring the participant to the campground the first day on time. Let someone know when you arrive if there are any special needs of the participant. Be willing to stay for sponsor's hour. You will be praying for your participant over his/her cross during this time. If you are not able to do this, please find someone who could fill in for you. If you will be late, please call the campground at (812) 254-3322 and let someone know that you are running late.

_____ Attend candlelight. Be prepared to pray for your participant by name during the candlelight service and take part in communion (before the participants come in). If you are unable to attend, please make sure that someone can take your place in this very important service. Invite the parents to attend candlelight with you. Bring any last minute agape.

_____ Be at closing. After the closing service, you will pack up your participant and bring him/her home. Continue to pray for your participant and maintain contact. Work to find a reunion group, bible study or prayer group.