



3444 N. 19th Avenue
Phoenix, AZ 85015
Fax - 775-599-1750

Elijah Generation Presents

Spiritual Boot Camp

Congratulations! You have been hand picked and chosen to join our select team of disciples.

You are about to embark on a journey with Jesus that will forever leave God's handprint on your life. Take this time to prepare yourself and seek God. Get ready to have the three most incredible weeks of your life at Spiritual Boot Camp.

The cost of tuition is \$1,500.00. This does not include airfare if you are flying in from out of town. The dates for this year's Spiritual Boot Camp will be July 13th thru August 3rd. Please make your flight arrangement flying into Phoenix, Sky Harbor Airport and flying out of San Francisco.

Please make sure to send in all the required information (i.e. photo, flight info, recommendation letters, etc.) to:

Elijah Generation International
C/o Spiritual Boot Camp
3444 N. 19th Avenue
Phoenix, AZ 85015

If you have any questions please feel free to call me at 1-602-996-9100.

In His Service,

Ceci Torres

Ceci Torres
SBC Director

"You'll be instigated to be a Hell Hater, provoked to be a Soul Snatcher, and inspired to be a God Chaser." -Ceci Torres

Spiritual Boot Camp **Flight Information**

Arrival Information

Airline: _____

Date of Arrival: _____

Departing City: _____ Time of Departure: _____

Layover? Yes / No If yes, what city? _____

If layover, what time of departure? _____

Arriving in: Phoenix, AZ Time of Arrival: _____

Departure Information

Airline: _____

Date of Departure: _____

Departing City: San Francisco, CA _ Time of Departure: _____

Spiritual Boot camp **Activity Guidelines**

“He who heeds discipline shows the way to life, but whoever ignores correction leads others astray” Proverbs 10:17

1. Please be courteous to others at all times. Treat others like you would treat Jesus.
2. Be at least five minutes early to all activities. This includes Morning Prayer, and services.
3. Be respectful and attentive to lectures and guest speakers.
4. No roughhousing or horseplay!!!
5. All activities will be conducted with an SBC staff member.
6. Godly relationships are encouraged between boys and girls in a group setting. The following are not acceptable in godly relationship:
 - Sitting together as a couple or sitting apart from the rest of the group
 - Engaging in a prolonged or “intimate” conversation apart from the rest of the group.
 - Demonstrating a special attention to or affection for each other.
 - Private meetings, business, or otherwise, that goes beyond a few minutes.
 - Phone conversations that consist of idle talk, private fellowship, or other unnecessary communication. Limited and to the point calls are allowed for conversation that have a good purpose, specific intention or clear direction.
 - E-mailing and writing letters. (This is the easiest way for boys and girls to share intimate feelings and thoughts.)

Student Signature _____

Parent Signature _____

Spiritual Bootcamp 2009

Things to Bring

1. Bible
2. Notebook
3. Pen and highlighter
4. Blue jeans
5. Tennis shoes
6. Towel
7. Sunscreen
8. Toiletries
9. Sleeping Bag
10. Pillow
11. Spending Money (\$200.00)
12. Cell phones ok with parent permission (Calling Card Preferred)
13. Modest Apparel (No short or string shirts or shorts)
14. Modest Swimsuits (One piece or tankinis for girl with swim shorts)
15. Please only bring one bag
16. Be flexible

Do Not Bring

1. No electronic devices (ei. IPods, PSP, CD Players)
2. No weapons
3. No drugs, alcohol, cigarettes or chewing tobacco
4. No piercing
5. No secular music or cd's

Spiritual Bootcamp Parent Consent and Release Form

I _____ am the parent and/or legal guardian of _____.

I consent to my child's participation in Spiritual Bootcamp. Hereinafter referred to as SBC.

I acknowledge and agree that SBC, its agents, employees and volunteers shall not be held liable in anyway for any occurrence resulting directly or indirectly from any activities that result in injury, death, or any other damages to my child. In consideration of my child being allowed to participate in these activities, on behalf of my child, I hereby personally assume all risk in connection with SBC activities, for any harm, injury or damage that may befall my child, or my family, heirs or assigns, while engaged in such activities.

My child _____ is given my permission to attend all functions of ministry at SBC. Furthermore, I release all forms of medical treatment in any capacity, should any treatment become necessary. Please consider this document as my comprehensive and unadulterated permission to treat my child medically in any type of emergency major and/or minor that necessitated treatment.

The Guarantor(s) agrees to indemnify Elijah Generation Spiritual Bootcamp and/or assigns, its employees, nominees, officers, directors, affiliates or volunteers from and against all actions, proceedings, claims or demands which may be made by reason of act, deed, matter or thing done or omitted to be done by any one of them and to pay all costs and expenses which may be incurred in the connection with any such action, proceedings claims or demands.

By signing this Service Agreement, both the Provider and Guarantor acknowledge having read understood and agreed upon the terms and conditions herein stated on this agreement. This agreement does not come into effect until both the Provider and Guarantor have signed.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

Notary Acknowledgement

State of _____ (Seal)

County of _____

This instrument was acknowledged before me on

Date _____

By _____

Signature of Notary

Spiritual Boot Camp Emergency Information

Medical Information

Name of Student _____

DOB: _____

Allergies: _____

Medical Conditions: _____

Special Instructions: _____

Blood Type: _____

Students Current Weight: _____

Physician Name: _____

Medical Insurance: _____

Policy Number: _____

Medical Carrier #: _____

Name of Parent: _____

Parents Date of Birth: _____

Parents Social Security #: _____

Please attach a copy of front and back of Insurance Card: _____

Emergency Contact

In case of an emergency please list the appropriate people that we can contact

First Contact:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Work: _____

Cell: _____ Other: _____

Relationship to Student: _____

Alternate Contact:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Work: _____

Cell: _____ Other: _____

Relationship to Student: _____

Parent Information

Name of Parents _____

Home Address _____

Work Phone _____ Home Phone _____

Cell Phone _____ E-mail address _____

Church _____ Pastor's Name _____

Church Address _____

Church Phone _____ Church Website _____