

Marriage Retreat

Please fill out the form below, print to PDF, and email to faithfrontierministries@gmail.com.

General

Full name

Other participants (with ages if under 18)

Email

Mailing address

Mobile phone

Notes (food allergies, medical conditions, etc.)

Emergency Contact

Emergency contact's full name

Emergency contact's phone

Pricing

Camp fee

☐ Family - \$0

☐ Couple - \$0

Suggested Donation- \$300-\$600

Room Options

☐ Stucco Bunkhouse

☐ Log Bunkhouse

☐ Family Suite

☐ Ranch Suite

☐ Shalom Cabin

Payment method (mail to 18122 129th PL NE Bothell WA 98011)

☐ Cash

☐ Check

*Please direct payments to Faith Frontier Ministries

Waiver and Medical Release

I hereby state that I am 18 years old or older. I hereby release Peniel Ranch and its officers, directors, and agents from any and all civil liability should any accident or injury happen to me or my family while attending this event. In case that I should become unconscious or unable to communicate, I give my permission to be treated by the nearest available medical facility. I understand that I am responsible for my own accident/health insurance.

Date

Signature

Photo/Media Release

I hereby grant Peniel Ranch/Faith Frontier Ministries the right to take and publish any and all pictures or videos taken of me and of the Minor(s) listed below to be used in and/or for any lawful promotional materials including newsletters, fliers, posters, brochures, advertisements, annual reports, websites, YouTube and Facebook.

I hereby release Peniel Ranch/Faith Frontier Ministries from all liability, which I, my heirs, or any other persons may make while acting on my behalf or on behalf of Minor(s).

I warrant that I am of full age and have every right to contract for Minor(s) in this regard. I state further that I have read the above release and that I am fully familiar with its contents.

Name

Minors (with Date of Birth)

Date

Signature