**Hurry! Space is limited.**

**Return Forms by May 5**

**Returnee Camp**

Tue – Sat

July 10 -14

**Returnee Camp**

Tues – Sat

June 12 -16

**Morning Star Ranch**

**MEDICAL RELEASE**

**Please circle the date your teen is attending Contact Rita Kay for info if these dates don't work**

**This form will be used to obtain medical treatment for any injury or illness.** A medical release form is required for every guest while at Morning Star Ranch Retreat and Conference Center, Inc. in order to participate in all ranch activities.

Participant’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_\_ (Male / Female)

School Currently Attending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade next Fall \_\_\_\_\_

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ St \_\_\_ Zip\_\_\_\_\_\_\_

**MORNING STAR RANCH RANGER / STAR PROGRAM (including Horseback Riding)**

(circle one) (name)

I, the undersigned parent or guardian, do hereby grant full permission for my son/daughter, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ,

to participate in all activities including work projects at Morning Star Ranch. In the event a parent or guardian cannot be reached, I hereby authorize MSR Camp Directors to obtain emergency medical treatment for my son/daughter from qualified medical personnel or institutions, for such injury, illness or emergency surgery. I further acknowledge, understand and agree that if my son/daughter requires medical treatment for illness or accident, I will assume responsibility for the cost of the treatment.

Parent or Guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**YEAR OF LAST TETANUS SHOT** \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (required to enter 7th grade)

Medications to be given while at MSR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication instructions \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LIST OF KNOWN ALLERGIES: ANY KNOWN MEDICAL PROBLEMS:**

Medicines: Convulsions:

Insects/Plants (especially poison ivy): Diabetes:

Foods: Other:

INSURANCE COMPANY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Policy Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**512-455-2552 Morning Star Ranch 4701 CR 328 Milano, TX 76556 msrministries@aol.com**

**msrministries@aol.com**

**MORNING STAR RANCH**

**PARTICIPANT PERMISSION AGREEMENT**

Participant’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Male / Female

Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_St \_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_

Teen Phone ( )\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teen E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please circle T-shirt size: Youth L Adult S Adult M Adult L Adult XL Adult 2XL**

Do you have any medical condition we should be aware of or any medical or physical condition that would affect your ability to meet the physical demands of horseback riding, ranch work or outdoor sports? \_\_\_\_Yes \_\_\_\_No

If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

**Father’s Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different from above) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ St \_\_\_ Zip \_\_\_\_\_\_\_\_

**Mother’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Phone ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (if different from above) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ St \_\_\_ Zip \_\_\_\_\_\_\_\_

**RELEASE, ACKNOWLEDGEMENT AND ASSUMPTION OF RISK**

I hereby acknowledge that I have voluntarily applied for myself and the above student to participate in the activities of horseback riding, outdoor sports / games and work projects at Morning Star Ranch.

I understand that the activities of horseback riding, outdoor sports / games, work projects and all other hazards and exposures connected with the activities conducted outdoors do involve risk and that I am cognizant of the risks and dangers inherent with the activities that I and/or my family, including any minor children, willingly assume the risk of injury as my responsibility, including loss of control, collisions with other participants, trees, buildings and other man made or natural obstacles, whether they are obvious or not obvious.

I acknowledge the physical nature of participating in outdoor activities and state that I and above participant are physically fit and fully capable to meet the physical demands of the activities we have enrolled to participate in.

I have read, understand and accept the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon the parties during the entire period of participation in the said activities. I will pay transportation costs for the above applicant if returned home because of health or discipline reasons.

GUARDIAN’S SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_ Please initial your consent if you are in agreement for the following statement:**

I give my permission for pictures and names of my children to be used on the msrministries.org website and in literature or ads promoting Morning Star Ranch Ministries.

**512-455-2552 Morning Star Ranch 4701 CR 328 Milano, TX 76556 msrministries@aol.com**

**Student** attending Morning Star Ranch**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**A SPECIAL INVITATION FOR FAMILIES**

**PARENTS AND GUESTS ARE INVITED TO**

**JOIN US AT MORNING STAR RANCH**

**Family Events**

**Arrive by 5:15 as your teen will be expecting you!**

Family Banquet 5:30 – 6:15 PM

Trail Competition 6:30 – 8:00 PM

Awards Ceremony 8:00 – 8:30 PM

**Please make banquet reservations for additional family members and/or guests.**

**We must know at registration for meal planning.**

**Banquet reservation payment is due at registration. Price includes meal, drink and dessert.**

**Teens & Adults $9**

**Children ages 5 - 12 $5**

**Children ages 4 & under Free**

Please list additional family members and/or guests attending banquet on Saturday. **Date:** \_\_\_\_\_\_\_\_\_\_\_\_

**Name Relation to Teen Age of Cost**

**Children**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ $\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ $\_\_\_\_\_\_\_\_\_\_

**Total Additional Guests \_\_\_\_** $**\_\_\_\_\_\_\_\_\_\_**

**Morning Star Ranch Ministries**

**Andy & Rita Kay Isaacs**

**4701 CR 328**

**Milano, TX 76556**

**512-455-2552**

***Please keep this page in a safe place for packing and Family Event information!***

**MORNING STAR RANCH 4-DAY GEAR LIST**

**Remember:**

-Date chosen: **June 12** or **July 10**

- Camp Registration is 6:00 - 6:30 pm

- No money required now.

- Payment for banquet reservation due Tuesday evening at registration.

**Return these forms to MSR ASAP and no later than May 5!**

* Medical Release Form
* Participation Agreement
* Family Banquet Reservation for guest meals ($ due at registration)

**IMPORTANT NOTE: Absolutely no cell phones** (they won’t work here anyway) **or** **electronic devices including IPods, mp3 players, computer games or IPads.**

**please do not bring any clothing or items with skulls or satanic symbolism.**

**GEAR LIST:** Be sure to write names on tags and on every item with permanent marker!

Please **DO NOT** bring

phone, food or money

Bible, pen or pencil

**OPTIONAL:**

Rain jacket or poncho - Camera

Sunglasses - Lip balm - Insect repellent

Hat, cap or visor (mandatory for sun protection)

Work gloves

Jeans or long pants (no low-rise cut waist)

Light weight long sleeve shirt (to protect arms during work projects – old, button down the front, cotton shirt is best. Knits are too hot – an old shirt from Mom's or Dad’s closet will work great.

Shirts **(**modest necklines only - no tank tops or low cut shirts)

Shorts (no short shorts - mid-thigh is best)

Long Socks (tall enough for cowboy boots to prevent blisters on ankles and legs)

Boots with heels & leather soles for riding horses (no rubber soles – **no need to buy new boots** – we have plenty of boots so let us know your size if you need some)

Shoes for inside cabin only (flip flops or house shoes - no outdoor shoes allowed inside)

Tennis shoes (for safety, no sandals or open-toed shoes allowed outdoors)

**FAMILY EVENT INFORMATION**

**ON SATURDAY EVENING**

**Arrive by 5:15 as your teen will be expecting you!**

Family Banquet 5:30 – 6:15 PM

Trail Competition 6:30 – 8:00 PM

Awards Ceremony following Competition

Modest Sleepwear

Sunblock

Toothbrush with case and Tooth Paste

Personal items (soap, shampoo, deodorant, etc.)

1 Towel and 1 wash cloth

Kitchen trash bag or pillow case for dirty clothes

**Part of our program is to help you learn to take care of and keep up with your possessions. We are not responsible for left behind or lost items. Put your name on everything!!!**

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