

**Morning Star Ranch**

*…building ROCK-Solid leaders for life!*

4701 CR 328 512-455-2552

Milano, TX. 76556 www.msrministries.org

**Your teen has been nominated by school faculty members for being honest,**

**hard working and a positive influence on other students and is invited to attend**

**STAR LEADERSHIP RETREAT**

**in Milano, TX**

**Reminder!**

**Please circle the date your teen is attending at the top of the Medical Release Form**

**June 2-5 or July 7-10**

**Wednesday 6:00pm – Saturday 8:30pm**

**Only return the following 3 forms:**

* **Medical Release Form**
* **Participation Agreement**
* **Family Banquet Reservation**

Payment for Banquet Reservation

is due Wednesday at registration.

**Space is very limited! Thirty-three schools in Central Texas are offered the opportunity to send 3 students each year. Each camp is limited to 25 teens to give every teen a unique experience.**

**To reserve your bunk return forms to school by**

**Monday, May 3**

**Reminder!**

**Registration: Wednesday night 6:00pm - 6:30pm**

**Please arrive bathed and fed as there will NOT be an evening meal on Wednesday.**

**KEEP THIS FORM**

**PARENTS & GUESTS ARE INVITED:**

Join us at Morning Star Ranch

**Family Events on Saturday Evening:**

Please arrive by 5:15 as your teen will be expecting you!

**Family Banquet 5:30 - 6:15 PM**

**Trail Competition 6:30 PM**

**Awards Ceremony After Competition**

**PARENTS & GUESTS**

**Family Banquet Reservation**

Adults & Teens…….. $9

Kids ages 5-12.....…..$5

Kids 4 & under…...Free

**Do not take checks or cash to school for**

**Banquet Reservation.**

**Money is due Wednesday at registration.**

MORNING STAR RANCH

Building ROCK-Solid Leaders for Life!

Summer 2019 STAR Retreat Leadership Program

**Boys & Girls going into 7th Grade**

**PLEASE KEEP THIS INFO IN A SAFE PLACE**

**Congratulations!**

Your teen is one of the outstanding students nominated by their school faculty for being honest, hard-working and a positive influence on other students.

As a reward, Morning Star Ranch Ministries in Milano, TX would like to offer your student a $250 scholarship. This means your student may attend a **STAR** **Leadership Retreat** at no cost to you.

Please review the enclosed information and choose the week your student would like to attend. Space is limited as these scholarships are being offered to 33 schools. This is the first of 5 scholarships that will be offered to your teen to continue 3 years of leadership training. **Please return the forms to your school office by Monday, May 3.**

If your teen is unable to attend, please return blank forms immediately so they may be given to another student.

If you have questions, please call **512-455-2552**

**Judge Andy Isaacs or Rita Kay Isaacs**

Go to msrministries.org to see photos of past camps.

Choose your date from the following

**2021 SUMMER TEEN PROGRAMS**

Leadership Development for Boys & Girls

**June 2 - 5 STAR Retreat**

**OR**

**July 7 - 10 STAR Retreat**

**Space is limited!**

**Return the following 3 forms to school by May 3**

* + Medical Release
  + Participation Agreement
  + Banquet Invitation

**Please circle best date on the Medical Release form.**

**Wednesday 6pm – Saturday 8:30pm**

Scholarship Includes:

Bunk

Meals & Snacks

Leadership Training

Bible Study

Horse Riding Lessons

Trail Obstacle Competition

MSR T-shirt

All Other Activities

**Registration: Wednesday 6:00pm – 6:30pm**

**Please arrive bathed and fed as we do not**

**provide an evening meal on Wednesday.**

Please let us know ASAP if you would like to

**For more information:**

Questions: [bcritakay@aol.com](mailto:bcritakay@aol.com)

**To register:** Andy or Rita Kay Isaacs

512-455-2552 979-219-2174

**Registration Forms:** msrministries.org

**PARENTS & GUESTS ARE INVITED**

Please join us at Morning Star Ranch for

**Family Events on Saturday Evening**

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

Family Banquet …………………... 5:30

Trail Obstacle Competition ….…… 6:30

Awards Ceremony Following Competition

Morning Star Ranch Ministries is a 501(c)3 nonprofit organization.

For more information contact Judge Andy Isaacs or Rita Kay Isaacs [msrministries@aol.com](mailto:msrministries@aol.com) 512-455-2552 [www.msrministries.org](http://www.msrministries.org)

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**MORNING STAR RANCH 3-DAY GEAR LIST**

**Reminder!**

Please **DO NOT** take this gear list back to school. Keep it in a safe place for packing!

**RETURN ONLY THE 3 FORMS LISTED BELOW TO YOUR SCHOOL ASAP!**

* Medical Release Form
* Participation Agreement
* Family Banquet Reservation for family and guest meals

**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!

**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

Bible, pen or pencil

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 – ABSOLUTELY no tank tops or low-cut shirts)

Shorts (ABSOLUTELY 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)

Modest Sleepwear

**OPTIONAL:**

Rain jacket or poncho

Sunglasses

Lip balm

Insect repellent

Camera

Please **DO NOT** bring

gum, phone, food or money

Sunblock

Toothbrush with case

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!!!**

**KEEP THIS FORM IN A SAFE PLACE FOR PACKING**

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

**Morning Star Ranch**

**Please circle the date your teen is attending**

**Reminder!**

STAR #1

Wed – Sat

June 2-5

STAR #2

Wed – Sat

July 7-10

**Over 30 schools involved so space is limited**

**Return Forms** to School by **May 3, 2021**

**MEDICAL RELEASE**

**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 ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE 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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**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 Other \_\_\_\_\_**

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, hauling hay or ranch work? \_\_\_\_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**

**Banquet Reservation Form**

**Student 's name** who isattending 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.**

**Please make payment at registration when you arrive. Includes: meal, drink and dessert.**

**Teens & Adults $10**

**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 \_\_\_\_** $**\_\_\_\_\_\_\_\_\_\_**