

# SHOCCO SPRINGS BAPTIST CONFERENCE CENTER

## CENTRI-KID WEEKEND CAMP GROUP LEADER INFORMATION

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*Please contact us if you have further questions: 1.877.CAMP.123*

# STEP ONE: PRE-CAMP PROGRAM DETAILS

*(Create your own Parent Pack from Step 1 and Step 2 below)*

## REGISTRATION POLICY AND PAYMENT SCHEDULE

**BEFORE FEBRUARY 1:** You may reserve your spot at camp anytime before February 1, 2009 with no deposit.

**FEBRUARY 1:** A \$50 per person deposit is required for each reservation to be paid on or before February 1. If you have already registered, you are required to pay a \$50 deposit per person to hold your reservation. Any new or additional reservations made after February 1 will require an immediate \$50 deposit per person. **ALL deposits are non-refundable and cannot be applied toward balance due.**

**MAY 1 - CANCELLATION DEADLINE:** All cancellations made after May 1 will incur an additional \$50.00 fee for each person dropped. **When cancellations occur, deposits cannot be applied toward balance due.**

**14 DAYS PRIOR TO CAMP:** Final balance must be received 14 days before your arrival at camp. If it is not, your group will be charged a one-time \$75.00 late fee.\*

**\*AUTO PAYMENT OPTION:** Authorized Group Leaders may give permission to charge the remaining balance to a church LifeWay account or credit card by calling LifeWay Events Registration at 1-877-CAMP-123. This must be done by May 1, 2009. Any adjustments for drops or additions will be applied to the specified account after camp.

## WHAT TO BRING

- Linens, towels, pillows, blankets
- Water bottle that you can refill and carry with you
- Closed toe, closed heel shoes (for outdoor activities)

- Bible, notepad, and pen
- Toiletries such as toothbrush and shampoo
- Sun protection
- Spending money for snacks, camp store, and missions offering (optional)
- **DO NOT BRING** alcohol, tobacco, illegal drugs, fireworks, water guns, or any kind of weapon
- **DO NOT BRING** radios, iPods, CD players, roller blades, skateboards – if students do bring cell phones please help be sure it is not a distraction at camp

## **CAMP BIBLE STUDY THEME**

**THEME TITLE:** JESUS 360

**THEME VERSE:** John 1:14

### **OPENING**      **JESUS: BORN IN A MANGER**

Today's Top Story: God's Son Born in a Stable

Scripture Reference: Luke 2:1-20

### **DAY 1**      **JESUS: MIRACLE WORKER**

Today's Top Stories: Jesus Stops Wind & Makes Blind Man See

Scripture References: Mark 4:35-41; John 9:1-7

### **DAY 2**      **JESUS: GOD WITH US**

Today's Top Story: Jesus' Friend Brought Back from the Dead

Scripture Reference: John 11:17-44

### **DAY 3**      **JESUS: BRIDGE TO GOD**

Today's Top Story: Jesus Died but Now Lives Forever!

Scripture References: John 19:17-18; 20:1-18

### **CLOSING**      **JESUS: BY YOUR SIDE**



Today's Top Story: Jesus Prays for His Disciples.

Scripture Reference: John 17:18-21

## **SPECIAL NEEDS REQUESTS**

Fuge takes the special needs of students and adults seriously. Meeting your needs and setting up your group for a great week of camp is important to us.

If one of your students has a special need that should be handled before camp starts, please allow the Group Leader to call our camp toll free line (1.877.CAMP.123) and share that with our events registration team so that it can be handled properly. The special need can also be shared with us via email to [fuge@lifeway.com](mailto:fuge@lifeway.com).

If your student's need should be known by our camp staff at camp, you have the option of completing a "Special Attention Card" for your student so that this need can be addressed by the Fuge staff. You can print and fill out this card before camp, or you can fill it out on registration day at camp. You can find a copy of the Fuge Special Attention Card in the Appendix of this document.

## **DAMAGES**

Please be aware that your group is personally responsible for damages to any facilities including but not limited to the dorm room your group occupies. You will also be asked by the facility to pay for any lost keys.

## **DRESS CODE**

Please ask your students and adult sponsors not to pack anything that:

- Advertises alcohol, tobacco, illegal drugs
- Explicitly or implicitly promotes racism, sexism, or hatred of any group or person
- Explicitly or implicitly refers to sexual actions or situations
- Has spaghetti straps, except for sleepwear



- Is excessively short or tight fitting.

While at camp, we ask that students and adults:

- Wear modest, one-piece bathing suits or two-piece suits covered with a colored t-shirt.
- Wear modest shorts, dresses, slacks, and jeans for worship. Long pants or knee-length skirts are required for students or adults participating in worship on stage.
- Do not dress in a way that calls attention to underwear (sagging your pants, rolling down your waistbands, etc)
- A dark t-shirt if you plan to take the Just Add H2O track.

We invite you to join us as leaders in monitoring your group to ensure they are dressing appropriately.

## **MISSIONS OFFERING**

The summer of 2009 we will celebrate the 25th anniversary of the Fuge missions offering. Students have given more than 8 million dollars and last year alone students gave over \$611,000. This mission offering goes to support the work of both the International Mission Board (IMB) and the North American Mission Board (NAMB).

These agencies have allowed us to target specific ministries with which students can identify. Our offering going to the IMB will continue to support the work of missionaries working with the Romany people in Central and Eastern Europe. More than 350 students responded last summer by going with their youth groups to minister and multiply the hands and feet of the Roma missionaries.

Our offering going to NAMB will help to support their Current Canada summer missions program. Current Canada is a partnership project between the North American Mission Board and the Canadian National Baptist Convention. This program is open to students who have completed the 11th grade or higher. You can check out their website at [www.currentcanada.com](http://www.currentcanada.com).

You have the opportunity to pray, give, and go to help these people groups



learn about the gospel. A missions offering will be collected at camp this summer, we hope you will begin praying now about what your church group can give.

To find out more information visit the Fuge Missions website:  
[http://www2.lifeway.com/fuge/index.php/missions\\_offering/](http://www2.lifeway.com/fuge/index.php/missions_offering/)

## **SPONSOR QUALIFICATIONS**

In order to provide the best atmosphere and supervision, we ask that all groups bring 1 male sponsor for every 5 boys, and 1 female sponsor for every 5 girls.

- All sponsors must be at least 18 years old.
- Help enforce curfew and supervise clean up of your groups' housing.
- Aid in monitoring the dress code of your students.
- Encourage participation and promptness by setting an example.

## **BRINGING CHILDREN TO CAMP**

We want you to be able to spend more time with the ones you love during your busy summer.

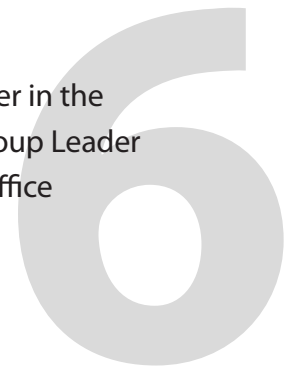
Children age 8 and older can come with you at the regular camp price, which includes housing and meals. They are welcome to join you, the parent, in programming.

For children too young to attend camp:

- Bed space and meals - full price
- No bed space or meals - no charge.

## **CHURCH GROUP DEVOTIONS**

Church Group Devotion is a time for each church group to be together in the evenings to debrief the day. This time usually lasts one hour. The Group Leader needs to determine what should be discussed or taught. The Fuge office



provides devotions for this time which can be found on the Fuge website after April 1. Print this and bring it to camp with you, if you choose to use it.

## **PARTICIPANT FORMS**

Every person coming to camp (adult sponsors and students) needs to complete two Fuge Participant Forms. Both copies need to be notarized. You can find the Participant Form in the Appendix of this document.

If for some reason, a student or adult in your group does not want to provide their social security number, please have them complete the "Refusal/Absence of Vital Information Form" that can also be found in the Appendix of this document.



## STEP 2: LOCATION DETAILS

### CONTACT INFORMATION

#### ADDRESS:

Shocco Springs Conference Center  
Attn: Centri-Kid (*please write church and camper name on all mail*)  
1314 Shocco Springs Rd  
Talladega, AL 35160

**Camp Cell Phone** (not active until May 15): (615) 429-2586

**Camp Email Address** (not active until May 15): [centrikid1@gmail.com](mailto:centrikid1@gmail.com)

**Centri-Kid Director:** Andy Dukes

#### BEFORE MAY 15 CONTACT:

**Events Registration:** 1.877.CAMP.123 or

**Andy Dukes:** 615.251.2059; [andy.dukes@lifeway.com](mailto:andy.dukes@lifeway.com)

### FACILITY INFORMATION

**Shocco Springs Website:** [www.shocco.org](http://www.shocco.org)

**Housing:** Motel-style

**Bath:** Private

**Linens:** Provided

**Amenities:** Olympic-size pool with diving board, Frisbee golf, tennis courts, basketball, paddle boats, lake, miniature golf, Aqua Park, horseshoes.

**Note:** Shocco Springs is in the Central time zone.

### PASTOR AND WORSHIP LEADER

**PASTOR:** Allen Marsh

**WORSHIP LEADER:** Jeff Slaughter



## CAMP SCHEDULE

### Day 1

Registration/Church Group Pics	2:00 – 4:00 pm
Dinner	5:30
Opening Activities Begin	6:30
In Room	10:15
Lights Out	10:30

### Day 2

Group Leader Meeting	7:00 am
Breakfast/Quiet Time	7:30
I Can't Wait . . .	8:30
Bible Study (younger grades)	9:00 am
Recreation (older grades)	
Bible Study (older grades)	10:30
Recreation (younger grades)	
Lunch	11:45
Track A	1:15 *
Track B	2:45 *
Free Time	4 pm
Dinner	5:30
Worship	6:30
Church Group Time	7:30
Party	8:30
In Room	10:15
Lights Out	10:30

### Day 3

Breakfast/Quiet Time	7:30 am
Load Buses	8:30
Bible Study	8:45
Closing Celebration	9:15
OMC	10:00
Churches Depart	11:00

\*\*Lunch Provided\*\*

\* Meet at "The Spot" each day



## CENTRI-KID TRACK TIMES

**Archery** - Learn how to shoot a bow & arrow and even practice on our foam targets!

**Babysitting 101** - Learn all about the different methods for babysitting.

\***CK Cheer** - Learn various skills, drill, and games of cheerleading.

**CK Football** - Learn various skills, drill, and games of football.

**CK Hoops** - Learn various skills, drill, and games of basketball.

**CK News** - Learn various methods for news writing and create your own news letter!

**CK Volleyball** - Learn various skills, drill, and games of volleyball.

**Creative Painting** - Create different pieces of art using paint.

\***Drama** - Learn what it means to be an actor and perform various skits.

\***Foot Praise** - Learn a creative movement and perform in front of camp.

**Disc Games** - Play all sorts of fun Frisbee games.

**Make It Take It** - An arts and crafts track where you make something different each day.

**Just Add H2O** - Fun outdoor water games.

**Kitchen Chaos** - Cook and create fun foods from various ingredients.

**Lawn Games** - Fun games played outside in the shade.

**No Boys Allowed** - A girls only track where you discuss specific "girl" topics.

\***Percussion** - Learn what percussion is all about and create your own melody/rhythm.

\***Praise Team** - Learn different worship songs and how to use the gift of music.

\***Sign Language** - Learning a song through Sign Language

**Splish Splash** - Games in the Pool.

**Weird Science** - Fun Experimental Games & Activities with safe ingredients

**Wiffle Ball** - Play Various Wiffle Ball Games

\* These are performance tracks that will perform during the Variety Show.

### 2 Options for Kids to Choose Track Times

1. Kids choose their tracks on the way to camp. Have campers list their top 4 tracks. Turn these in once you arrive at Registration.
2. Kids choose their tracks once they arrive at camp. No prior work is necessary.

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# STEP 3: ARRIVAL AT CAMP AND REGISTRATION CHECKLIST

## ARRIVAL AT CAMP

When you arrive to camp this summer, you will need to bring the following with you (both of which are included in this document):

- **Two notarized Participant Forms** (medical release form) for each camper and sponsor. Please bring them separated into two sets. One complete set of forms will be turned in upon arrival to Fuge and the other set is to be kept with the Church Group Leader at all times.
- **Registration checklist.**

Registration will take place between 1pm and 4pm.

Look for banners to point you to Fuge Registration.

You should not have to bring payment with you, unless you have changes at the last minute, as payments are due two weeks prior to arrival at camp.

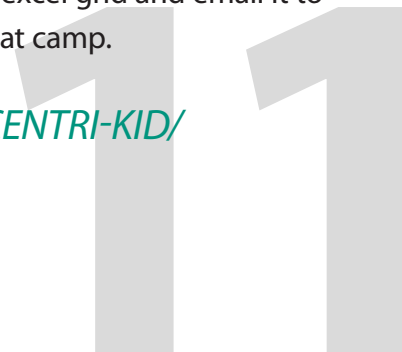
## REGISTRATION CHECKLIST

One of the items to have in hand upon arrival at camp is the Registration Checklist. Please print this checklist (found on the page below), complete it, and bring it with you to registration.

## PARTICIPANT LIST (EXCEL GRID)

In order to get your students into Bible study groups, we need to know their names and ages before they arrive at camp. Click on the link below for this Participant List excel document. Please complete the excel grid and email it to [centrikid1@gmail.com](mailto:centrikid1@gmail.com) two weeks prior to your arrival at camp.

>> [PARTICIPANT LIST EXCEL DOCUMENT CENTRI-KID/  
CROSSPOINT](#)



# CENTRI-KID AND CROSSPOINT REGISTRATION CHECKLIST

Bring two notarized Participant Forms for each camper and sponsor. Please bring them separated into 2 sets. One complete set of forms will be turned in upon arrival and the other set is to be kept with the church group leader.

Complete this page and turn it in at Registration.

### GROUP SUMMARY:

	<i>FEMALE</i>	<i>MALE</i>
<i>CAMPERS</i>		
<i>SPONSORS</i>		
<i>TOTAL</i>		
<i>GROUP TOTAL</i>		

### T-SHIRT SIZES:

<i>YOUTH MEDIUM</i>	
<i>YOUTH LARGE</i>	
<i>SMALL</i>	
<i>MEDIUM</i>	
<i>LARGE</i>	
<i>X-LARGE</i>	
<i>XX-LARGE</i>	
<i>XXX-LARGE</i>	

# APPENDIX

Fuge Special Attention Card  
Refusal/Absence of Vital Information Form  
Participant Form

# SPECIAL ATTENTION CARD

CAMP LOCATION: \_\_\_\_\_

CAMP DATES: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

CHURCH NAME: \_\_\_\_\_

GROUP LEADER: \_\_\_\_\_

BIBLE STUDY LEADER: \_\_\_\_\_

DESCRIPTION OF NEED: (use space below as needed)

Please provide information that will help us to better minister to this student. *DO NOT disclose any confidential information.*

.....

## FOR FUGE USE ONLY

PROVIDE DETAILS OF WAYS YOU MINISTERED SPECIFICALLY TO THIS STUDENT:

PROVIDE ANY CHANGES NOTED OR ACTIONS TAKEN ON THE PART OF THE STUDENT.

PROVIDE COMMENTS TO GROUP LEADER ABOUT THIS STUDENT:

STAFF SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

# REFUSAL/ABSENCE OF VITAL INFORMATION

To LifeWay Christian Resources:

Please let this serve to confirm that, despite LifeWay’s request for such information, I am unable or refuse to provide a Social Security number in connection with the medical release for my child. I understand that the absence of this information in the medical release could cause delays or other problems in securing medical attention for my child. To induce LifeWay to permit my child to participate in the camp and related activities despite the absence of such information, I hereby release LifeWay Christian Resources, its employees, agents and contractors, and hold them harmless from and against any and all claims for any and all damages and expenses relating to LifeWay’s failure to have this information.

**PARENT/LEGAL GUARDIAN SIGNATURE:**

X \_\_\_\_\_

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

**PRINTED NAME AND ADDRESS:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**NOTARIZATION REQUIRED**

**NOTARY PRINTED NAME:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

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

## Fuge Participant Form

Bring ONE notarized copy of this sheet to registration and keep ONE notarized copy for yourself to have with you at camp. Attach a photocopy of insurance form or card.

Participant Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_  
SS# \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ ZIP \_\_\_\_\_  
Name of Church \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_  
ZIP \_\_\_\_\_  
In case of an emergency notify: \_\_\_\_\_ Phone Numbers - Home:(\_\_\_\_\_) \_\_\_\_\_  
Work: (\_\_\_\_\_) Mobile:(\_\_\_\_\_) Pager:(\_\_\_\_\_) Other:(\_\_\_\_\_) \_\_\_\_\_

### Medical Profile

Generally, Participant's Health is: (Check One) \_\_\_ Excellent \_\_\_ Good \_\_\_ Fair \_\_\_ Poor

If Fair or Poor, please explain your condition: \_\_\_\_\_

List any medical difficulties for which you are currently being treated: \_\_\_\_\_

Check any of the following that cause you problems and explain: Asthma \_\_\_ Sinusitis \_\_\_ Bronchitis \_\_\_

Kidney Trouble \_\_\_ Heart Trouble \_\_\_ Diabetes \_\_\_ Dizziness \_\_\_ Stomach Upset \_\_\_ Hay Fever \_\_\_

List any medicines or substances to which you are allergic: \_\_\_\_\_

List any previous operations or serious illnesses \_\_\_\_\_

List any medications you are currently taking: \_\_\_\_\_

List any special diet or special needs: \_\_\_\_\_

Childhood Diseases: \_\_\_ Chickenpox \_\_\_ Measles \_\_\_ Mumps \_\_\_ Whooping Cough \_\_\_ Other \_\_\_\_\_

Date of Tetanus Immunization: \_\_\_/\_\_\_/\_\_\_

Family Physician \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_

Insurance Co. \_\_\_\_\_ Policy # \_\_\_\_\_

Subscriber Name: \_\_\_\_\_ Subscriber Number \_\_\_\_\_ Place of Employment \_\_\_\_\_

Subscriber Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### **Permission For Medical Treatment, Photograph/Video Notice, and Release and Indemnity**

My permission is granted for the camp or event director, church official, any camp or event staffer, or adult present or in charge of First Aid, to obtain necessary medical attention in case of sickness or injury to me or my child. Also, I understand that as a participant or my child may be photographed or videotaped during normal camp or event activities and these photos/videos may be used in promotional materials. I, the undersigned, do hereby verify that the above information is correct and I do hereby release and forever discharge LifeWay Christian Resources of the Southern Baptist Convention, camp or event sponsors, or state conventions and their employees from any and all claims, costs, demands, actions or causes of action, past, present, or future arising out of any damage or injury while employed by or participating in this camp or event. I agree to indemnify LifeWay for any and all claims, demands, damages, injuries, costs, suits or causes of action, past, present, or future, arising out of or caused by myself or my child while participating in this camp or event or while on property leased or owned by LifeWay. Complete and sign below (youth under 18 years of age requires Parent/Legal Guardian signature)

Participant's Signature \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Parent/ Guardian Signature \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

### Notary Acknowledgement (Notary: please affix seal to both sheets.)

State of \_\_\_\_\_ }

County of \_\_\_\_\_ }

Personally appeared before me, \_\_\_\_\_, with whom I am personally acquainted, and who acknowledged that he/she executed the within instrument for the purposes therein contained. Witness my hand this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Notary signature: \_\_\_\_\_

My commission expires: \_\_\_\_\_

P.O. Box 886  
Talladega, AL 35161  
PH: 800.280.1105  
FAX: 256.761.1270  
www.shocco.org



## Waiver & Release

*Participants in recreational events held at Shocco Springs Baptist Conference Center, Inc. (SSBCC) must have a signed and witnessed OR notarized Waiver & Release Form, including adults 19 and over. Pages 1 and 2 of this form must be presented at Event check-in.*

Name of Church: \_\_\_\_\_ City/State: \_\_\_\_\_ Phone \_\_\_\_\_

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Age \_\_\_\_\_ Sex: Male/Female  
*optional*

Address: \_\_\_\_\_ Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_ address: \_\_\_\_\_

**Event Name:** \_\_\_\_\_ **Event Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

Please read the recreation activities description on **Page 4** and initial that you understand all approved activities for the person herein described.

\_\_\_\_\_ **3.1 Adventure Recreation on Property**                      \_\_\_\_\_ **3.2 Adventure Recreation Off Property**  
\_\_\_\_\_ **3.3 Adventure Recreation Paintball**                      \_\_\_\_\_ **3.4 Waterfront**

**Consideration.** I acknowledge the personal benefits accruing to me by reason of participation in the above described event and am aware of the activities in which I will be involved through said participation.

**Release / Indemnification.** I hereby, in consideration of such benefits and other good and valuable consideration received, consent to the above listed participation and release absolutely, forever discharge, hold harmless and covenant not to sue SSBCC, LifeWay Christian Resources, their directors, employees, agents, volunteers and affiliates from any and all present or future liability, claims, demands, actions, or rights of action, whether asserted by me or a third party arising out of my participation in event activities (the "Claims"). I agree to indemnify SSBCC and LifeWay Christian Resources for any such Claims brought by me or a third party from any costs associated with defending or litigating such claims, including but not limited to attorney fees, costs and legal expenses.

**Assumption of Risk.** I am aware of the risks associated with participation in the above event and do hereby voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death, that may result from participation in event activities, whether caused by SSBCC's or LifeWay's negligence or otherwise. (See Page 3 for SSBCC Recreation Activities Descriptions)

**Medical Emergency.** In the event of injury or a medical emergency, I understand that the group's leader, not SSBCC or \_\_\_\_\_ LifeWay Christian Resources \_\_\_\_\_, will be responsible for the medical care of all attendees. It will be the group leader's responsibility to assess medical needs, obtain and consent to appropriate medical care, transport persons in need of medical care. I release SSBCC and \_\_\_\_\_ LifeWay Christian Resources \_\_\_\_\_ from any and all liability related to medical treatment. In addition, I assume the risk and financial responsibility for any injury resulting from the attendee's participation in all SSBCC events.

SSBCC's guest medical supplement will assist within current/prescribed **limitations** in a similar way to a secondary carrier. If no insurance is provided by the family or the sponsoring church/organization, SSBCC's guest medical supplement will also assist within current/prescribed **limitations**.

**Understanding.** I represent and acknowledge that I have completely read and understand this document and all its terms, that I have had an ample opportunity to obtain the advice of counsel and that, by signing this document, I understand that I am relinquishing legal rights and remedies that may have otherwise been available to me. I understand that this Waiver and Release shall be construed as broadly and inclusively as is permitted by applicable law and agree that if any portion of this document is held invalid, the remaining shall continue in full force and effect. To the extent the restriction on filing lawsuits is deemed unlawful, I agree to submit any Claims to a Christian conciliation/mediation organization for binding resolution.

**Media Consent.** I give my consent and permission for the taking of photographs and/or video of me during the described event and waive and/or assign any and all rights (including copyright) in such media to SSBCC and \_\_\_\_\_ LifeWay Christian Resources \_\_\_\_\_. SSBCC and \_\_\_\_\_ LifeWay Christian Resources \_\_\_\_\_, as the sole owner of such media, shall have the exclusive right to control and determine the use, display, performance, reproduction and dissemination of any such photographs and/or videos.

**CAUTION: READ THIS DOCUMENT CAREFULLY BEFORE SIGNING. THIS IS A GENERAL RELEASE AND INDEMNIFICATION OF CLAIMS.**  
**Please check and sign below:**

Attendee (19 years of age and over)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact #: \_\_\_\_\_

**Witness**  
I witnessed \_\_\_\_\_  
Name  
sign the above Waiver and Release on  
\_\_\_\_\_  
Date  
  
\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Print Name  
  
\_\_\_\_\_  
Address  
  
\_\_\_\_\_  
City, State Zip Code

**Notary Information**  
The following is to be completed by the notary witnessing attendee's signature.  
The state of \_\_\_\_\_  
The county of \_\_\_\_\_  
  
Before me, a Notary Public, on this day personally appeared \_\_\_\_\_  
known to me (or proved to me on the oath of \_\_\_\_\_)  
to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purpose and consideration therein expressed. Given under my hand and the seal of the office this \_\_\_\_\_ day of \_\_\_\_\_, A.D. \_\_\_\_\_.

Notary Public, State of \_\_\_\_\_  
  
\_\_\_\_\_  
Notary Public

My commission expires the \_\_\_\_\_ day of \_\_\_\_\_, A.D. \_\_\_\_\_.