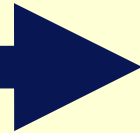


2025 NEW LIFE WOMEN'S FALL RETREAT

Living

INSIDE



OUT

Learning to be FAITHFUL, HOLY & COURAGEOUS

Friday-Sunday, September 19-21, 2025

We hope to see you at Camp Jonah this Fall for a weekend of worship, Bible teaching, recreation, yummy food, special connections, and spiritual growth. Our key verse is Colossians 1:9a-10: "We continually ask God to fill you with the knowledge of his will through all the wisdom and understanding that the Spirit gives, so that you may live a life worthy of the Lord and please him in every way: bearing fruit in every good work, growing in the knowledge of God." Join us in learning to follow God as He transforms our thinking, purifies our hearts and leads us out to live boldly for Him!

DETAILS

- ♦ This Retreat is open to women age 14 and up
- ♦ The beautiful, newer Creekside facility at Camp Jonah offers smaller rooms and more bathroom facilities. These rooms are available at an increased price on a first come/first served basis. To reserve a Creekside bed, please contact Sharon Gerchak at (509)250-0088.
- ♦ Cost: \$120 OR \$170 for a bed in the new Creekside facility (\$10 discount if registered by Monday, August 25th)
- ♦ Saturday only option: \$40 - includes lunch & dinner (You're also welcome to come for the Friday evening service at no charge.)
- ♦ Scholarships available upon request - contact the church office (509)773-4650
- ♦ Registration options:
 - 1) Fill out the attached forms and turn them in to the church office or mail them to the address at the bottom of this page
 - 2) Register online using the QR Code or at newlifeaggoldendale.org/women
- ♦ Deadline to register: Monday, September 8th - Please turn in Registration Form, Camp Jonah Acknowledgement of Risk Form, and payment by this date.



New Life Assembly of God, PO Box 92, Goldendale, WA (509)773-4650

RETREAT SCHEDULE

Friday, September 19

- 6:00-6:30pm Check-in
- 7:00pm Gathering
- 9:00pm Snacks/Fellowship

Saturday, September 20

- 8:30am Breakfast
- 9:00am Saturday only check-in
- 9:30am Gathering
- 11:20am Breakout 1
- 12:30pm Lunch
- 1:30pm Breakout 2
- 2:30pm Recreation/Free Time
- 5:30pm Dinner
- 6:30pm Discussion Groups
- 7:45pm Worship/Response/Prayer

Sunday, September 21

- 8:00am Breakfast
- 9:00am Gathering
- 10:30am Close & head home

SATURDAY'S RECREATIONAL OPTIONS

- Crafting
- Bus Tour - see the beautiful area & learn some of its history (The schedule allows you to do both Crafting & Bus Tour)
- S'mores
- Hiking (bring appropriate attire)
- Gym is available for basketball, walking, etc.
- Rec Room - pool, ping pong, carpet ball, foosball, air hockey, pop-a-shot basketball
- Tennis Court (bring own racquets/balls)
- Board Games (Feel free to bring your favorite!)
- The Lunch Counter - This is a fun, comfortable space to hang out, shop at the Camp Store, play some games or watch a movie!

IMPORTANT INFORMATION

- Camp Jonah's address is: 31 Little Mountain Rd., Trout Lake, WA 98650 (about 80 minute drive from Goldendale) If you need a ride or are willing to give a ride, please indicate that on your Registration Form.
- The facilities at Camp Jonah have double and triple bunk beds. Be sure to indicate on your Registration Form if you need a bottom bunk, and we will do our best to accommodate you.
- Check-in time on Friday is 6:00-6:30pm.
- Be sure to eat dinner before you come! (We'll have snacks available later in the evening.)
- Saturday only attendees check in at 9:00am.
- The retreat will end at 10:30am on Sunday.
- Please self-screen for symptoms of illness before coming. If you are ill, we'll miss you and will refund your registration fee.
- If you haven't been to Camp Jonah, you can check it out at campjonah.com
- If you have any questions, please contact Sharon Gerchak (509)250-0088

WHAT TO BRING

- | | | |
|---|---|--|
| • Sleeping Bag | • Bible | • Money for Camp Store |
| • Pillow | • Warm clothing for outdoor activities | snacks/shirts/sweatshirts (optional) |
| • Extra blanket (optional) | • Appropriate attire/equipment for recreational activities you may want to do | • Offering for Camp Jonah (optional) |
| • Towel | • Camp Chair (optional) | • Power strip |
| • Toiletries (including shampoo/conditioner/shower gel) | • Eye mask/ear plugs | • C-pap users should bring an extension cord |
| • Flashlight | | |

2025 WOMEN'S RETREAT REGISTRATION FORM

Name: _____

Phone: _____

Address: _____

Email: _____

Food Allergies: _____

The facilities at Camp Jonah have double and triple bunk beds. Please check here if it is necessary for you to have a bottom bunk, and we will do our best to accommodate you.

☐ I need a bottom bunk

Check here if you are registering for Saturday only: ☐

☐ I need transportation from Goldendale to Camp Jonah.

☐ I am willing to drive others to Camp Jonah if needed.

Cost: If registering by August 25th:

☐ \$110 for a standard room

☐ \$160 for a bed in the new Creekside facility (There are a limited number of beds in this area, so you MUST contact Sharon Gerchak [509-250-0088] to reserve a spot. Beds will be assigned in the order paid registrations are received.)

If registering after August 25th:

☐ \$120 for a standard room

☐ \$170 for a bed in Creekside (please see note above)

\$40 if registering for Saturday only

*Please contact New Life Assembly of God at (509)773-4650 if you need a scholarship.

Amount Paid: _____

**Please return Registration Form, Camp Jonah Acknowledgement of Risk Form, & Payment to:
New Life Assembly of God, PO Box 92, Goldendale, WA 98620. Please make checks payable to
New Life A/G. Payments may also be made online at www.newlifeaggoldendale.org**

Deadline to register: September 8, 2025

CAMP JONAH ACKNOWLEDGEMENT OF RISK FORM

All guests and staff of Camp Jonah must sign this waiver

31 Little Mountain Road, Trout Lake, WA, 98650 * 509-395-2900 * www.campjonah.com * jonah@campjonah.com

RELEASE OF LIABILITY:

As a guest of Camp Jonah (CJ), I understand that a certain amount of risk is involved for individuals engaging in our program. As a guest or camper I recognize the element of risk in attending camp and in any adventure, sport or activity associated with the CJ program. I am fully aware of the risks and dangers inherent in group and personal activities such as, but not limited to: hiking, rafting, caving, low and high challenge course, zipline, climbing wall, inflatables, swimming, backpacking, field games, etc.

I understand the possible risks and dangers of participating in group and individual activities. I realize that illnesses and injuries, carelessness, including failure to follow instructions, of other participants and CJ staff, may occur and may be the cause of loss or damage to equipment or personal injury, illness, and, in extreme cases, permanent trauma and death.

certify that I have the necessary skills and ability to participate in CJ programs and assume full responsibility for myself for bodily injury, sickness, death and loss of personal property and expenses thereof as a result of my negligence in participation, except to the extent such damage or injury may be due to the negligence of the CJ staff.

I also agree to abide by the rules or instructions given to me either verbally or in writing by CJ staff. I further understand that CJ reserves the right to refuse to allow any person to participate who is judged to be incapable of meeting the rigors and requirements of participating in said activity.

I assume any risk that could result while participating in the CJ program—either on or off-campus. I recognize that CJ cannot guarantee that the participants, equipment, grounds and/or activities will be free of accidents or injuries. I understand that CJ has taken extensive measures to aid in the safety of all guests, campers, and participants. I agree to assume the risk of injury, illness, and expense that could result from my involvement at CJ. I release the property owners, CJ, its staff members, and Board of Directors from liability for any injury or illness to me while a guest or camper of CJ.

In the event that medical care is necessary, I (or parent/guardian) give permission to CJ staff to authorize transport, hospitalization, x-ray, secure proper treatment for, and to order injection and/or anesthesia and/or surgery for the participant named above. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating; otherwise, I agree to bear the costs of any such injury or damage. My signature below certifies that I am in good health and do not have any medical or physical limitations that would affect my participation in CJ activities.

MEDIA RELEASE:

I give permission for CJ to use any photo or video of me/my child for CJ or promotional advertising. I release my rights to any kind of remuneration for said photos or videos.

I have read, understood, and accepted the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon me during the entire period of participation in the said activity.

Participant's Printed Name

Participant's Age

Date

Signature of Adult Participant (18 years and older)

OR Signature of Parent/Guardian (of minor participant under 18)

Printed Name of Adult Participant

OR Printed Name of Parent/Guardian

EMERGENCY CONTACT INFORMATION:

#1 Name _____ Phone # _____

#2 Name _____ Phone # _____