



June 20-24 -- XTREME SUMMER 2011 -- Panama City Beach, FL

Up to 22 youth slots open...BE SURE to reserve yours today!

30 blessed people will be heading to Panama City, Florida this summer for one XTREME week! Will you be one of them?



Monday, June 20

5:30am—Meet at Broadway in back parking lot
 4:30pm—Arrive at resort
 4:30 pm—6:00pm: Registration
 6:00pm—8:00 pm: Dinner
 8:00 pm: Xtreme Evening: Matt Pitt, Speaker

Tuesday, June 21

8:00 am—9:30 am: Breakfast
 9:30 am: Xtreme Morning Worship: Will Goodwin & Johnny Hunt
 12:00-6:00pm: Free time/Beach Activities
 6:00pm-8:00pm: Dinner
 8:00pm: Xtreme Evening: Newsboys in concert

Wednesday, June 22

8:00 am—9:30 am: Breakfast
 9:30 am: Xtreme Morning Worship: Will Goodwin & Johnny Hunt
 12:00-6:00pm: Free time/Beach Activities
 6:00pm-8:00pm: Dinner
 8:00pm: Xtreme Evening: LeCrae in concert, Pete Hixson, Speaker

Thursday, June 23

8:00 am—9:30 am: Breakfast
 9:30 am: Xtreme Morning Worship: Will Goodwin & Johnny Hunt
 12:00-6:00pm: Free time/Beach Activities
 6:00pm-8:00pm: Dinner
 8:00pm: Xtreme Evening: Newsong in concert

Friday, June 24

8:00 am—9:30 am: Breakfast
 9:30 am: Xtreme Morning Worship: Will Goodwin & Johnny Hunt
 11am: Conference Ends
 11 pm: Pick up at Broadway back parking lot



NEWSBOYS



LECRAE



NEWSONG



Johnny Hunt Matt Pitt Pete Hixson Will Goodwin





Registration Form

Name: _____ Home #: _____
Cell #: _____ Home Address: _____
City, State, Zip: _____ Email: _____

Facebook Name: _____

Communication through Facebook is a valid way to reach me.

Parent Name(s): _____

Cell(s): _____

Email(s): _____

Facebook Name(s): _____

Communication through Facebook is a valid way to reach me.

Medical History/known allergies to foods, drugs, bee stings, etc:

List of all medications currently taking, when you take them, and what they treat (attach separate sheet if you need to):

Physicians Name/Phone: _____

Any further information that staff/volunteers should be aware of: _____

Insurance Information: (Please attach a copy of current insurance card to this form.)

Medical Release Form 2011

I, _____, do hereby give my permission for my child to participate in the Panama City Youth Conference. It is my understanding that the staff and volunteers of Broadway United Methodist Church will take all necessary precautions to ensure the safety of my child. I also give permission for the staff or volunteers to obtain such medical treatment as deemed necessary. I understand that every effort will be made to contact me, or my alternate contact person.

Student Name (printed): _____

Parent Name (printed): _____

Parent Phone: _____

Alternative Emergency Contact Name/Relationship/Phone

Parent Signature: _____ Date: _____

REGISTRATION DEADLINE: APRIL 1, 2011