

Group Leader Retreat Check-In Form

Church & City: Church Contact Person: In an effort to ensure the safety of all participants on this retreat, we are asking that each church contact review this document with a camp staff member.			
		We have gone over and agree to the follow	ing:
		 I have turned in a Warren Willis Camp everyone our group, including myself. 	
	s for everyone in my group under the age of		
 The adults on my retreat have been pro Protection Policies. 	perly screened per our conference's Child		
 I have or will communicate with my ad- our group this weekend. 	ults regarding their role of supervision with		
<u> </u>	p policies this weekend at camp. (A list of www.warrenwilliscamp.org.)		
Church Contact Person:	Date:		
Signature			