## South Carolina Lutheran Via De Cristo

## **Pilgrim Registration**

PLEASE PRINT		Dates of Weekend	
Name			
Address (Street, City, State)	:		
Phone:	Email:	M/F:	
Do you require any special	consideration for housing? (i.e.	e., can you use stairs?) Please explain any special	
Requirements:			
Will you require any specia	l medical attention? (i.e. Med	icine, CPAP, Dietary restrictions, allergies?)	
Please explain:			
Do you understand that Via	de Cristo is a continuing prog	gram of spiritual growth? Yes/No	
Your church (Name, City, S	tate):		
Pastor's signature (Required	 l):	Date:	
Sponsor's Name (Required)		Phone:	
Sponsor's Email:	Home add	lress	
Registrant's Signature (Req	uired)	<u>Date</u>	
Sponsor Signature (Require	d)	_Date	
Emergency Contact Name (	Required)		
Emergency contact Phone:	<i>Em</i>	Emergency Contact Email:	

(Form continues on back)

## **HEALTH WAIVER AND ASSUMPTION OF RISK:**

Please remember that viruses can be spread through people who exhibit no symptoms of the virus. Via de Cristo and each participant completes a health checklist at the beginning of the retreat. Knowing this, Via de Cristo cannot guarantee or promise that proper social distancing will always occur between individuals. We cannot promise or guarantee that a person will not contract an illness from group participation. Via de Cristo does strive to take reasonable steps, and trust others who are attending to also take reasonable steps to avoid spreading illness. Therefore, you expressly agree to assume the risk through your attendance.

If you agree with the contents of this	waiver, please sign and date here:	
Signature	Date:	

Please return this completed form to your sponsor

\*Sponsor is responsible for returning this completed registration form to the member of Secretariat responsible for Pre-Weekend Activities:

Joey Hydrick 2401 Kings Gate Lane Mt. Pleasant, SC 29466 Joey2mp@gmail.com

\*A non-refundable registration fee of \$50 must accompany completed registration form. A balance of \$125 is due upon arrival at camp for the retreat.

\*Please make checks payable to SCVDC

Revised 12/08/2025