

# 2023 AVALANCHE



# MINECRAFT

**D-A Ranch, Metamora, MI  
February 17-19**



Sponsored by Michigan District Royal Rangers

# Avalanche 2023

## February 17-19, D-A Ranch, Metamora, Michigan

The theme this year is '**Mindscape**' based on Romans 12:2 – Be transformed by the renewing of your mind! Avalanche will focus on the adventure on building your world in God's Kingdom.

Our event speaker will be Dr. CaVar Reid. He is the STAND Director at River of Life Church in Belleville, Michigan. He brings energy and life while speaking to youth about the gospel of Jesus Christ. He also works at U of M as a Senior Program manager. His greatest purpose is to serve the Lord in holiness and help others do the same.



In addition, we will have the special activities that make D-A Ranch a special place – camp forests, three lakes, hiking trails and warm rustic cabins. We want to encourage all boys and men to wear their warm outdoor gear for this great weekend. Forms and information are available on [www.michrr.com](http://www.michrr.com)

### Who can Come?

This event is open to boys (ages 9 and older), fathers, grandfathers, pastors and leaders. Younger boys may attend with their fathers. Each church is responsible for permission forms and direct supervision of their boys at all times during this event. Forms need to be completed and brought to registration on Feb 17<sup>th</sup>.

### Location and Facilities

The D-A Ranch is located in Metamora, Michigan, which is south of Lapeer and north of Oxford. It is a huge ranch facility full of activities, trails, lakes and cabins. The cabins are heated and modern shower/bathroom complexes are available. All the meals will be provided during this weekend event.

**D-A Ranch  
880 E. Sutton Rd.  
Metamora, MI  
48455**

### Activities and Agenda

Avalanche includes many activities: trail hiking, archery, rifle range, shotgun, sledding and ice fishing. Minecraft theme games will also be featured. We also encourage groups to bring sleds, skates and ice-fishing equipment. Fire pits are available at each cabin site.

This event begins on February 17<sup>th</sup>, Friday night at 7pm at the Main Lodge. A detailed agenda with all scheduled activities, meals and events will be posted on the [michrr.com](http://michrr.com) website and distributed at Registration. Avalanche 2023 ends on February 19<sup>th</sup>, Sunday after lunch about 2pm.

### Cost

The cost is **\$85 per person** which includes all meals, event patch, activities and 2 nights of cabin lodging. A \$25 per person pre-registration is required by **January 31** to reserve cabin space and meals commitment. An additional \$10 per person late fee will be required after February 1. Cabin size and selection preferences will be made on a first request basis. Pastors are invited to attend at a half-cost rate.

### What to Bring

The cabins are heated and equipped with bunks and mattresses, so you will need to bring a sleeping bag or blankets. Personal items should include warm clothing, boots, hat, toothbrush and accessories. Shower and indoor bathroom facilities are available. Groups may want to bring snacks, bottled water, hot chocolate and coffee as each cabin has a kitchen and stove. Do **NOT** bring radios, TVs or electronic games.

# Avalanche 2023 Pre-Registration

Church \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

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

Pastor \_\_\_\_\_

Cabin Preference? (Cabins range in size: 12, 16, 25 - most common size, 36) \_\_\_\_\_

Names of Men to serve as Cabin Leaders: \_\_\_\_\_

## Cost

Pre - Registration Costs: \_\_\_\_\_ x \$25 = \_\_\_\_\_  
There is 1/2 cost for Pastors

Balance of Registration Costs: \_\_\_\_\_ x \$60  
Due on February 17th

Mail this Completed Form and Payment by **January 31<sup>st</sup>** to:

Greg Wessel  
596 Hampton Ct.  
Wixom, MI 48393

Make Checks payable to:

**Assemblies of God, Michigan District**

Credit card payments are also available.  
Request the Avalanche cc form or obtain  
on the website.



## Notes:

1. Registration fees are transferable within a church group. However, NO refunds will be given.
2. Late registration may be accepted. However, a [\\$10 per person late fee](#) will be assessed. Exceptions will be made for new churches, guests and special cases.
3. Bring to Avalanche Registration: Permission/Medical/Health forms and completed Registration form.
4. Questions concerning registration? Need more information - visit [www.michrr.com](http://www.michrr.com) or email Greg Wessel at michrr@gmail.com.

## ADULT Registration Form and Medical Information

This form must be completed and signed to attend this event. *PLEASE PRINT!*

Event: 2023 Avalanche Location: D-A Ranch, Metamora, MI Date: Feb 17-19, 2023

Name \_\_\_\_\_ Phone \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

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

Church \_\_\_\_\_

Church Address \_\_\_\_\_

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

Name of Responsible Leader \_\_\_\_\_

Pastor \_\_\_\_\_

### Medical and Emergency Information

I will not hold the local church, Royal Rangers or any of their staff, the Assemblies of God, nor the DA Ranch, or any of their agents or staff, responsible for accidents or injuries. I understand there will be an Emergency First Aid Station on location. In the event of an illness or accident, I do hereby give my consent to the staff to administer any medical treatment deemed necessary by licensed Physicians, Dentists or Emergency Medical Personnel serving during this event.

Contact Name for Emergency \_\_\_\_\_

Emergency Phone # \_\_\_\_\_

Doctor Name \_\_\_\_\_ Doctor Phone # \_\_\_\_\_

Medical History: Good Health? \_\_\_\_\_

Allergies? \_\_\_\_\_

Any Physical Impairment(s) (Heart, Epilepsy, Hearing, Vision, Asthma, Diabetes, etc.)? \_\_\_\_\_

Specify any medication that must be administered. Any special instructions? (Use other side if necessary) \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Insurance ID and Group Number: \_\_\_\_\_

### **PASTOR'S Certification for Adult Campers**

Pastor's Signature \_\_\_\_\_

Pastoral Position at Church \_\_\_\_\_ Date \_\_\_\_\_

**Please PRINT clearly – copy this form for each camper – Bring to Registration**

## MINOR Registration Form

This form must be completed, signed and accompany the minor to attend this event. The purpose of this form is to make it possible for parents or guardians to authorize the provision of emergency treatment for any child under the age of 18 who may become ill or injured. *PLEASE PRINT!*

Event: 2023 Avalanche Location: D-A Ranch, Metamora, MI Date: Feb 17-19, 2023

Minor's Name \_\_\_\_\_ Phone \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

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

Church \_\_\_\_\_

Church Address \_\_\_\_\_

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

Name of Responsible Leader \_\_\_\_\_

Pastor \_\_\_\_\_

## PARENT Permission Form, Medical Authorization and Medical Information

I hereby give my permission for the above named child to attend this event. I understand the arrangements and believe that adequate precautions for the safety of my child have been and will be provided at this event. I will not hold the local church, Royal Rangers or any of their staff, the Assemblies of God, nor the DA Ranch, or any of their agents or staff, responsible for accidents or injuries. I understand there will be an Emergency First Aid Station on location. In the event of an illness or accident to my child, I do hereby give my consent to the staff to administer any medical treatment deemed necessary by licensed Physicians, Dentists or Emergency Medical Personnel serving during this event.

Name of Parent or Legal Guardian \_\_\_\_\_

Relationship \_\_\_\_\_

Home Phone # \_\_\_\_\_ Other Phone # \_\_\_\_\_

Doctor Name \_\_\_\_\_ Doctor Phone # \_\_\_\_\_

Medical History: Good Health? \_\_\_\_\_

Allergies? \_\_\_\_\_

Any Physical Impairments (Heart, Epilepsy, Hearing, Vision, Asthma, Diabetes, etc.)? \_\_\_\_\_

Specify any medication that must be administered. Any special instructions? (Use other side if necessary) \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Insurance ID and Group Number: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

**Please PRINT clearly – copy this form for each camper – Bring to Registration**

# Avalanche Camp Registration Form

Fill Out and Bring to Camp / Required Form / Please print clearly

Church Name \_\_\_\_\_ Responsible Leader \_\_\_\_\_

	Name	Boys / grade				
		Adult	K-2	3-5	6-8	9-12
1.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>