

## Micro TEC #2 "TEC in a Day"

**What:** Micro TEC #2 "TEC in a Day" will be a powerful 12 hour experience for those who have previously made a TEC weekend! Our plan is to re-experience parts of a TEC weekend in 12 hours!! Take this opportunity to encounter our Christ in a beautiful way! It's going to be amazing!!

**Who: Anyone** (youth or adult) who have made a TEC weekend.

**When:** Saturday July 31<sup>st</sup> , 9AM – 8:30PM

**NOTE: Lunch and dinner will be served!**

**Where: St Peter's Church, 2600 Maine, Quincy, IL**

**SIGN UP on line!!!** The cost of the Micro TEC is \$35.00 **Checks payable to Great River TEC.**

**For questions call: Dave Cawthon (217) 440-4244**

### **Micro TEC Application**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City & State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone:

(\_\_\_\_) \_\_\_\_\_

School: \_\_\_\_\_ Grade \_\_\_\_\_

**Birth date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

Number of Last TEC: \_\_\_\_\_

Participant's email address: \_\_\_\_\_

### **Emergency Info:**

Parent Name(s): \_\_\_\_\_ Phone:(\_\_\_\_) \_\_\_\_\_

Space is limited, so register early!

### **FOR THOSE UNDER AGE 18: Medical Release Form**

I give permission for my child \_\_\_\_\_ to be treated by a doctor in the case of an emergency on the Micro TEC weekend. I further release Great River TEC from the liability for any physical injury that my son/daughter might incur in conjunction with the Micro TEC weekend.

Parent's Name \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Describe any medication(s) that your child is allergic to: \_\_\_\_\_

Person to be contacted in the case of an emergency:

Name \_\_\_\_\_

Phone(\_\_\_\_) \_\_\_\_\_

Send or email Application and check to:

Great Rive TEC

6608 State St

Quincy IL 62305

detersjd@gmail.com

(217) 653-4246