

Mail to:
CEF of Oregon, Inc./
Ponderosa Chapter
3625 NW Oak Ave
Redmond, OR 97756

Reference: _____

Name: _____

Address: _____

City _____ State _____ Zip _____

Phone or e-mail:

Reference: _____

Name: _____

Address: _____

City _____ State _____ Zip _____

Phone or e-mail:

How do I apply?

Send in registration form, **registration fee**, short testimony including why you would like to attend pre-training, and the name and address of 2 references (one of which should be your pastor or Sunday School Teacher) to

CEF Oregon—Ponderosa Chapter
3625 NW Oak Ave
Redmond, OR 97756

Applications need to be returned to your local director no later than March 20th. Applications received after March 31st will be charged an extra \$25 fee. Additional pre-training applications can be had by emailing PonderosaCEF@Gmail.com or call our office and we will mail them.

Local CEF Contact Information:
CEF of Oregon, Inc./Ponderosa Chapter
3625 NW Oak Ave.
Redmond OR 97756
Phone: 541-365-2233
E-mail: ponderosacef@gmail.com
Website: www.ponderosacef.com

Where is *CYA* held?

Christian Youth in Action Pre-training school is held at :
Camp Morrow Bible Camp
79551 N Morrow Rd.
Tygh Valley OR 97063



Pre-Training

April 3–5, 2020

Training teens to share the Gospel message of hope!



Since 1937

CEF
CHILD EVANGELISM
FELLOWSHIP®

Reaching children worldwide™

Christian Youth In Action®
Pre-Training Retreat
April 3-5, 2020

Are you planning on being involved in outreach this summer - VBS, 5-Day Club®/ backyard clubs, fair ministry, street evangelism, missions trips, etc.? Prepare yourself for the summer by taking this basic evangelism and outreach course. This is a prerequisite course for youth involved with CEF's summer missions program, Christian Youth in Action®. However, anyone (13-through high school age) is welcome to attend this quality training course. It will be a great time to get acquainted



with other youth wanting to serve the Lord.
 >> 2020 Central/Eastern OR CYIA Pre-training <<

Sessions Include:

- What is CEF
- God's View of Children
- Using the Wordless Book to share the Gospel message
- Practice in Sharing the Gospel
- How to teach a Memory Verse
- How to teach a song
- Demonstration of a 5-Day Club® (backyard Bible Club)
- Other sessions for upper level/returning stu-



Kid's love 5-Day Club

Cost: \$60.00 , if application received by 3/20, includes: 6 meals, lodging, and training notes. \$85.00 for late registration received after March 31.

Date/Time: 4:00 p.m. Friday April 6th
 to 3:00 p.m. Sunday April 8th.

What to Bring: Sleeping bag, pillow, warm respectable clothes, bug spray, toiletries, Bible, notebook, warm jacket, flashlight, and a prepared heart. **(Returning students - review and bring previous year's CYIA Student Manual and notes.)**



Please do not bring: Any electronic gadgets or cell phones. If any of these items are brought, they will be placed in storage until the end of the week-end.

When submitting this application please include: a short written testimony including why you wish to attend, and the name and address of 2 references (one should be your pas-

tor or Sunday School teacher) along with the registration fee.

Before You Come:

Memorize (if have not already) the following verses: Jn. 3:16, Rom. 3:23, Heb. 9:22, 1 Cor.15:3-5, Jn.1:12, Heb. 13:5, 1 Jn. 1:9 and 2 Peter 3:18



Location of camp:

Camp Morrow Bible Camp
 79551 Morrow Road
 Tygh Valley, OR 97063

Student's Name (Please Print)

CYIA Level for 2020 _____

Home _____

Phone _____

Emergency _____

Phone _____

Address _____

City _____ State _____

Zip _____ Birth Date _____

Name of Medical Insurance Company and Policy

Do you have any:

Allergies? _____ Medications? _____

If yes, please list:

Last tetanus shot: _____

I understand that reasonable measures will be taken to safeguard the health and safety of my child and that I will be notified as soon as possible should an emergency occur. However, in the event of sickness or accident, I will not hold the group leaders, the church, the facilities rented, or *Child Evangelism Fellowship* responsible. In case of sickness or accident, I authorize the call of a doctor and/ or the providing of the necessary medical services.

Date _____

Signature of parent or guardian:

I give my permission for photos of my child for use in newsletters and advertisements for *Child Evangelism Fellowship*

Circle one Yes No