

二〇一六年度蓋城華人宣道會/恩典華人基督教會退修會

2016 Gaithersburg Chinese Alliance Church/Grace Chinese Christian Church Annual Retreat

時間 / Date: 5月27日傍晚(週五)至30日(週一) May 27th Evening (Friday) to 30th noon (Monday)

地點 / Place: 浸信會天峰閣退修會營地 Skycroft Baptist Conference and Retreat Center (<http://www.skycroft.org>)

地址 / Address: 9621 Frostown Road, Middletown, MD 21769

國語組講員 (Mandarin Speaker): 華欣牧師 (Pastor Xin Hua)

國語組主題 (Theme): 出黑暗入奇妙光明

1. 金牛釀禍 (出埃及記 32:1-35)
2. 背影有情 (出埃及記 33:1-23)
3. 石版開口 (出埃及記 34:1-28)
4. 人脸发光 (出埃及記 34:29-35:3)
5. 彩云呼喚 (出埃及記 40:1-38)
6. 活在明天 (彼得後書 3:1-18) [主日証道]

國語組專題 (Mandarin Workshops):

- 一. 工作坊信息---高青林師母
 1. 建立小組同工團隊
 2. 帶領改變生命的小組聚會
 3. 問題導向的討論式歸納法查經
- 二. [ABCD 傳福音小組] 培訓---孫文冠弟兄
 1. 如何拓展[新的福音朋友]? 如何開始[ABCD 傳福音小組]?
 2. 如何透過 [ABCD 傳福音小組] 有果效地傳福音?
 3. 如何複製 [ABCD 小組], 完成生命的傳承 與 跨代的連接?

English Speaker (英語組講員): Rev. Roy Chang

English Theme (英語組主題): Faith That Works

1. Testing 1...2...3 (James 1:1-12)
2. The Face of Temptation (James 1:13-18)
3. Find It, Fix It (James 1:19-27)
4. Lower Your Standards! (James 2:1-13)
5. What Can Be Done To Tame The Tongue? (James 3:1-12)
6. Share The Wealth (James 5:1-6)

Workshop Titles:

1. Alpha: Relationship Ministry
2. Alpha: Small Group Ministry
3. Alpha: Prayer Ministry

兒童節目同工 Children Program Ministers: Christine Reiser and Lydia Warden (Child Evangelism Fellowship of Maryland)

報名截止日期: 2016年5月22日(週日)。若逾期報名, 每家須多繳 \$20。

Registration Deadline: 5/22/2016 (Sunday). Late registration fee of \$20 per family will be imposed.

5月13日週五下午必須通知退修會營地參加人數以準備食物, 請儘早報名, 以避免食物不夠。

By 5/13 Friday afternoon, a total number of participants has to be provided to Skycroft Conference Center to prepare food for the retreat. Please register ASAP to avoid any insufficient food supply.

退修會節目表 Program Schedule:

日期 Date 時間 Time	週五 Friday (5/27)	日期 Date 時間 Time	週六 Saturday (5/28)	週日 Sunday (5/29)	週一 Monday (5/30)
		7:00 - 7:30	晨禱 Morning Prayer	晨禱 Morning Prayer	晨禱 Morning Prayer
		7:30 - 8:15	早餐 Breakfast	早餐 Breakfast	早餐 Breakfast
		9:00 - 10:30	信息(二) Message (2)	信息(四) Message (4)	信息(六) Message (6)
		10:45 - 12:00	專題 Workshop	專題 Workshop	專題 Workshop
		12:00 - 12:45	午餐 Lunch	午餐 Lunch *	午餐 Lunch
4:00 - 7:00	報到 Arrival/Registration	1:00 - 3:15	自由活動 Free Time	自由活動 Free Time	11:00 清離宿舍 Room Checkout Time 11:00
		3:15 - 5:30			
7:00 - 7:45	晚餐 Dinner	5:30 - 6:15	晚餐 Dinner	晚餐 Dinner	
8:00 - 9:45	信息(一) Message (1)	6:30 - 8:30	信息(三) Message (3)	信息(五) Message (5)	
10:00 - 10:45	自由交通 Sharing Time	8:45 - 10:00	自由交通 Sharing Time	見證分享 Testimony	
11:00	熄燈 Lights Out	11:00	熄燈 Lights Out	熄燈 Lights Out	

* 週日午餐後有團體照 Group Picture will be taken after Sunday lunch.

報名聯絡人 Registration Contacts:

何曉鵬 Xiaopeng He (301) 990-9331
彭玉英 Susana Yeh (301) 610-0740

孫廣平 Guangping Sun (301) 424-2158
彭倩文 Chan-Wen Peng (301) 916-5449

盧欣萍 Xinping Lu (301) 424-2158
陳珣瑩 Hsun-Ying Chen (240) 224-3711

二〇一六年度退修會收據 Receipt for 2016 Annual Retreat (Registration No. _____)

姓名 _____ 報名人數 _____ 全部報名費 _____
Name: _____ Total # attending: _____ Total Registration Fee: _____

尚欠款項

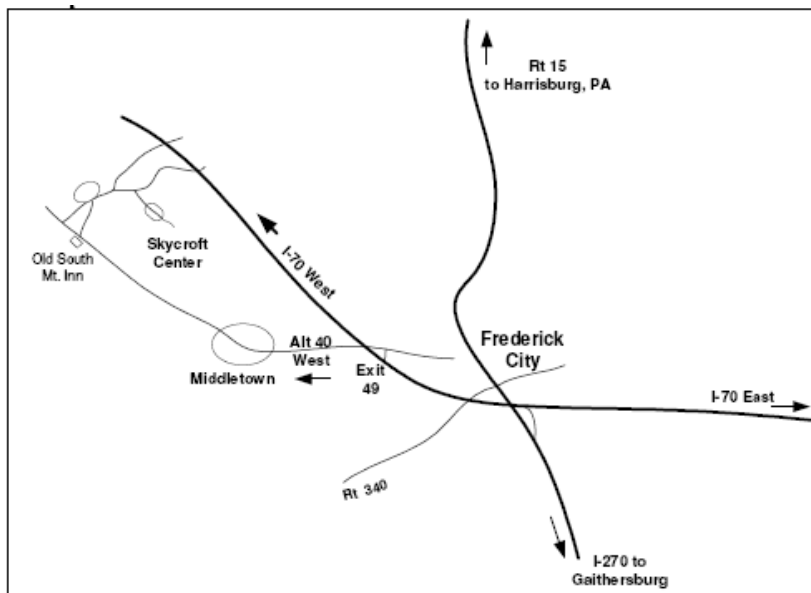
Balance Due: _____

攜帶物品 Items You Should Bring

- 1) 聖經、筆記本、筆、支票、康樂活動器材、手電筒、雨傘、盥洗用品、換洗衣物。山上早晚較寒，請自帶外套。另請自帶床單、枕套、浴巾。如有嬰兒隨行，請帶足夠嬰兒奶品及用品。房間內沒有冰箱設備。自備乾糧（大會供應熱水）。運動服裝，游泳衣。
- 2) 注意：教會不許可提供任何藥物，只會準備繃帶、與清洗傷口的消毒藥水。
- 1) Bible, notebook, pen, checkbook, musical instruments, sport equipment, flash lights, umbrella, clothes, and jacket (temperature is lower on the mountain). Also, please bring your own linen and towels. Parents with infants, please bring enough formula and diapers. There is no refrigerator in the bedrooms. Bring your own snack (church provides hot water). Dress for exercise and swimming suit.
- 2) Note: Church will not be allowed to give and/or administer any medication. Only band-aids, Bandage, disinfectants will be provided.

週五下午四點開始報到，晚餐時間 7:00pm - 7:45pm.

Friday afternoon Check in Time: 4:00pm, Dinner Time: 7:00pm to 7:45pm



Direction to Skycroft

1. Take Interstate 270 North to Frederick.
2. Before Frederick, stay on right lane to turn to Interstate 70 West.
3. Shortly past Frederick, take Exit 49 (Middletown and Braddock Heights) and turn left.
4. Go through Middletown and start going up mountain.
5. At top of mountain you will see the "Old South Mountain Inn" on your left, turn right directly across the Inn. This is Washington Monument Road.
6. At the end of the road, there is a 4-way stop. The entrance to the Washington Monument State Park is in front of you. Turn right onto Monument Road.
7. Take first right, this is Michael Road. Go about 1/4 mile and turn right at the Skycroft sign on the right.
8. Park your car, and check in at the large yellow brick building. This is dining hall called Gresham Hall.

路程指南

由 Interstate 270 向北開往 Frederick，向右分岔接 Interstate 70 往西，在第 49 號出口出去接 Alt 40 往西（左轉）。穿過 Middletown 再開往山區直到在路左邊看見一餐館 Old South Mt. Inn，同時在路右邊有路標指往 Washington Monument State Park。在此右轉，一直開到 Park 入口，不進 Park，再往右轉，然後在右邊第一條路再右轉，約再 1/4 哩跟隨路標再右轉即可到達 Skycroft 會場。請到左前方的 Gresham Hall（餐廳）報到。

2016 Annual Retreat Registration Form

Date: _____

請填寫家人資料 Please fill information for each family member:

請填寫姓名如教會通訊錄所記 Print your names as Church directory			語言組 Language	性別 Sex	通車 Commuter	年齡 Age	年齡分組 Age Group						各人 費用 Individual Cost
Last Name	First Name	中文姓名					男女	0至4 歲	學前至 五年級	六至八 年級	九至十 二年級	青壯 年	
			Eng 國	M F									
			Eng 國	M F									
			Eng 國	M F									
			Eng 國	M F									
			Eng 國	M F									
			Eng 國	M F									

*電話 Phone Number:	Email:	總費用: Total Fee:
地址 Address:		

報名費用 Registration Fee: 支票抬頭請寫「GCAC」。Checks payable to 「GCAC」

年齡 Age	0-3 Yrs 歲	4-8 Yrs 歲	成人(8 歲以上) Adult (above 8 Yr old)	通車 Commuter (above 3)
費用 Fee	免費 Free	\$115	\$160	\$110

除報名費用之外，其餘請酌量奉獻。奉獻請註明為『退修會』。報名費之外的奉獻都可以免稅。

Besides the registration fee, please make offering to cover the extra cost of retreat. Please designate the offering for "Retreat".

Any offering above the registration fee will be tax deductible.

特別需要 Special Needs:

1. 十八歲以上之成年人，在報名時須簽署一份 責任豁免書。以家庭報名，每一家只需簽署一份。

Adult (age 18 & up) needs to sign Liability Waiver at registration. Each family just needs to sign one copy.

2. 十八歲以下之青少年若無家長或監護人陪同參加，家長或監護人在報名時需要簽署 家長同意書，並指定臨時監護人。

If youths (below age 18) attend the retreat by themselves, the parent or legal guardian needs to arrange an on-site legal guardian and sign Permission Slip at registration.

3. 十二歲以下之小孩必須有家長或監護人陪同參加，否則大會不受理報名。

Children (under 12) must be accompanied by a parent or guardian otherwise no registration will be handled.

4. 如果您有經濟難處請與牧師長老聯繫。Please contact Pastors or Elders if you need financial assistance.

5. 接送需要? Ride Provider / Need Ride?

是否需要接送? Do you need rides?	是Yes 否No	多少人需被接送 How many people need rides?	
是否可幫忙接送? Can you provide rides?	是Yes 否No	可接送多少人 How many seats can you provide?	

6. 其它需要 (Other Needs) :

(請勿填此欄。Reserved Section, please do not write here.)

Total Expense:\$ _____

Registration Fee: \$ _____ Cash: _____ Check w/Check #: _____ Date: _____

\$ _____ Cash: _____ Check w/Check #: _____ Date: _____

本文件上半部 (豁免書) 每一家需要簽名

Every Family is required to sign the upper section of this form.

二〇一六年度退修會 責任豁免書 2016 Annual Retreat Liability Waiver

I, _____ (Print Name), hereby acknowledge that as a participant in a retreat run by Gaithersburg Chinese Alliance Church (GCAC) my family and I are in good health. GCAC assume no responsibility and will not be held liable for any accidents resulting in medical, dental or other expenses. I also understand that my son/daughter is in good health and has my permission to participate in the retreat. I hereby agree to waive all claims against GCAC.

Signature

Date

十八歲以下青少年 自行參加退修會 家長同意書
Youth (below 18 years old) Attending Alone - Permission Slip

The undersigned gives permission for (please PRINT name or names below, include last name if different)

_____, _____, _____
to attend the Gaithersburg Chinese Alliance Church Annual Retreat. In the event of injury or illness, I give my permission to those in charge to take any steps necessary to stop bleeding and to administer first aid. I also consent to an X-ray examination, anesthetic, medical, dental or surgical diagnosis, treatment, hospital care, the administration of drugs or specialized supervision upon advice of a duly licensed physician and/or surgeon.

I acknowledge that I have the option to decide whether I will stay with my children or let my children stay with the youth group. In either case, I must let my children know that they must be in their lodge after 11:00 pm each night during the retreat period. Whether my children reside with me or not I assume complete responsibility for their actions and safety during the entire retreat period.

If I do not attend this retreat, the following person will attend retreat along with my children and supervise my children as an on-site legal guardian during retreat. In event of an emergency, this person shall be contacted.

Name of On-Site Legal Guardian: _____ Phone: _____

Parent's Name: (last name) _____ (first name) _____ Phone: _____

Parent's Address: _____

(Signature of parent or legal guardian)

(Date)