

“REACH the lost, DISCIPLE the saved, LOVE all people

➡ Youth Permission Form (Due 3/1 & Required for Admission) ⬅

Church Group with whom you are Attending: _____

Group’s Church Address: _____

Group’s Church Phone/mail: _____

Please Fill Out ONE FORM per PARTICIPANT

For: Grades 6 THROUGH 12 and FRIENDS!

Event: “Let’s Fly” XTREME LOCK-IN!

Includes: Fellowship, Devotions, Praise & Worship Band, Annual Xtreme Movie & “Pray 4 Me”, Video Gaming, Youth Serve project, Cosmo Bowling, and Bus Transportation!

New for 2010: Skatedaze Fun Plex (with Roller Skating & Optional Laser Tag)

Date: Friday, March 12th into Saturday, March 13th, 2010

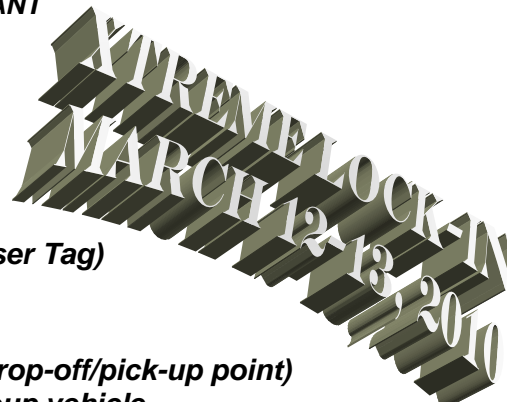
Time: Doors open 7:30 p.m. 3/12 to 6:30 a.m. 3/13

Location: Event begins and ends at St. Mark Lutheran (local parent drop-off/pick-up point) Transportation during event provided via school bus or group vehicle.

Contact Persons: IDCE Steve Prescott (753-9016) or email sprescott@stmarkomaha.org
Pastor Greg Moyer (391-6148) or email gmoyer@stmarkomaha.org

Cost: \$34.00 ea. Adults Attend FREE! (make checks payable to St. Mark Lutheran)

Bring: Small toiletory donations to participate in our Youth Serve project (details on back), snack bar and Laser Tag/Climbing Wall \$, roller skates/blades, AND FRIENDS!!!



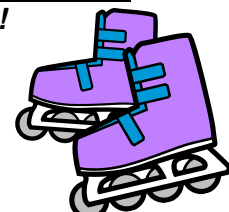
Participant Name: _____ Grade _____

Home Address: _____

City/State/Zip: _____

Home Phone: _____ E-mail _____

Parent/Guardian Name: _____ Emergency Phone #: _____



CONSENT FORM AND LIABILITY WAIVER:

I hereby give permission for (student name) _____ to participate in the activity described above sponsored by St. Mark Lutheran Church’s Youth Ministry. I understand that this activity may require my child to be transported by private car/chartered school bus and hereby give my permission for this also. I assume all responsibility and liability for injury to my child, and for injury which my child may cause to others. I hereby release and forever discharge St. Mark Lutheran Church, their officers, employees, and members from any and all damages and causes of action either at law or in equity which I or my child may have as a result of participation in, attendance at, and travel to and from any of the Youth Ministry activities sponsored by the church.

Signature of parent or guardian

date

EMERGENCY AUTHORIZATION:

I the undersigned, parent or legal guardian of the participant, a minor, hereby authorizes the staff and/or volunteer leaders of the St. Mark Lutheran Church Youth Ministry program, as my Agents, to give consent to any and all necessary emergency medical care for my child while said child is in attendance at any church sponsored event. In case of emergency I hereby authorize treatment, and/or care at any local hospital.



Signature of parent or guardian

date

NOTE: GROUPS ATTENDING MUST BRING 1 ADULT FOR EVERY 7 YOUTH IN ATTENDANCE

Group No. _____ Registrant No. _____ Registration Paid Amount Due \$ _____