

St. John's Senior High Homeless Awareness Overnight

May 16-17th



East side
of Church

Come raise money for Habitat For Humanity!

St. John's Senior High Homeless Overnight Form – May 16, 2009

I hereby give permission for my son/daughter, _____, to attend & participate in the Homeless Awareness Overnight on Saturday, May 16, 2009. I understand that this is a St. John's High School Youth Event held at the Church. We will have at least 3 adult chaperones. There is no fee for this event. All youths are asked to come by 6 PM on Saturday, May 16th and bring the following items: sleeping bag or blanket, simple sack dinner, large boxes to make their homeless shelter, and warm clothes for the overnight. We will be collecting money from the congregation at all the morning services on Sunday, May 17th.

(Youth's Name)

(parent or guardian)

(date)

Address: _____ Phone #: _____ Grade: _____

Email: _____ Birthdate: _____ Church: _____

Medical Permission - I grant permission for the administration of FIRST AID to _____ by the responsible adults of the St. John's Youth Ministry Program of this trip/activity/event and those transporting my child to and from as their judgment deems advisable, and to make the necessary referrals to qualified physicians for treatment of illness or accidents of a more serious nature. In case of medical emergency, I understand that every effort will be made to contact the parent/guardian of the participant. In the event that I cannot be reached, I hereby give permission to the physicians selected by the adult staff to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery, if deemed necessary for my child.

Signature of Parent: _____ date: _____