

5TH & 6TH GRADERS

NCO PRETEEN: WORK & WITNESS 2010

CHANGING THE WORLD ON PURPOSE

MATTHEW 25:40

MAY 14 & 15, 2010

FRIDAY



Ashtabula

CHECK IN AT 7PM

(PLEASE EAT BEFORE COMING)

WACKY TALENT SHOW 8PM

Show your unique talent in this fun show.
Individuals or groups can show off talent.
Come prepared to have fun. All will receive a
prize. (clean talent only)

SATURDAY

6:00AM BREAKFAST & DEVOTIONAL

8AM CLEAN UP HOUSING FOR THE NEEDY

- Lunch Provided -



2PM CHARTERED TRAIN RIDE

\$25. Per Person \$25.**

Parents are Encouraged to Attend

Bring: Jeans, extra clothes (in the event of rain), pj's, clean underwear, sweatshirt or light jacket, work shoes, Bible, toothbrush/ toothpaste, pillow & sleeping bag, washcloth & hand towel, water bottle for work site, work gloves, flashlight, and **Please bring a snack to share for after Friday Night Skits.** (Please use cell phones respectfully)

Description of Activity: Overnight Stay @ Ashtabula First Church of the Nazarene, Wacky Talent Show Friday Night, Saturday Morning Devotions, Clean Up and Beautification Project at City of Ashtabula Location. Ashtabula Carson & Jefferson Chartered Train Ride Saturday Afternoon. Return to Ashtabula Church by 4pm for child pick up.

****Scholarships Available. Please Contact Pastor Matt @ 419.889.4646 or revdoerle@gmail.com**

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ACTIVITY PARTICIPATION AGREEMENT

T-Shirt **Child Size**(Circle) S M L **Adult Size** S M L XL XXL

(Deadline for size is May 1st)

ACTIVITY INFORMATION

Name of sponsoring organization: North Central Ohio District Church of the Nazarene/ Children's Ministries
Address: Mt. Vernon, Ohio Telephone: (740) 397-5740

Name of sponsor's coordinator: Pastor Matt Doerle Home Phone: (419) 396-7080 Cell: (419) 889-4646

Description of activity: Overnight Stay @ Ashtabula First Church of the Nazarene, Wacky Talent Show Friday Night, Saturday Morning Devotions, Clean Up and Beautification Project at City of Ashtabula Location. Ashtabula Carson & Jefferson Chartered Train Ride Saturday Afternoon. Return to Ashtabula Church by 4pm.

Dates and Location of Activity: May 14th, 7pm to May 15th @ 4pm – Ashtabula, Ohio – Base of Operations, Ashtabula First Church of the Nazarene

PARTICIPANT INFORMATION

(To be completed by participant or authorized guardian)

Name of Participant: _____ Phone Number(s) _____

Address: _____

Name of Emergency Contact: _____ Phone Number(s) _____

Additional Contact Names and Numbers:

Name: _____ Phone: _____

Name: _____ Phone: _____

Medical Information:

Is sponsor authorized to approve medical treatment? _____ Yes _____ No

Is participant covered by personal/family medical insurance? _____ Yes _____ No

If Yes, name of insurer: _____ Policy or group number: _____



Allergies-Medication
Special Information

Participation Agreement

In consideration for the opportunity to participate in the above activity, the Participant (or parent/guardian if Participant is minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the activity. The Participant (or parent/guardian) accepts personal financial responsibility for any injury sustained during the activity (including during transportation to and from the activity). Further, the Participant (or parent/guardian) promises to indemnify, defend, and hold harmless the activity sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to hereinafter as the "Sponsor") for any injury related directly or indirectly out of the described activity or transportation to and from the activity, whether such injury arises out of the negligence of the Sponsor or otherwise.

If a dispute over this agreement or any claim for damages arises, the Participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the Participant (or parent/guardian) and the Sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel of the American Arbitration Association for final resolution.

Signature _____ Date _____

(Participant or Parent/Guardian if Participant is Minor)

Criminal Background Checks need to be up to date for church representatives and/or parents that are participating. Please contact me for any questions (419) 889-4646

Please Send Completed Form with Registration Fee to:
(Make Checks Payable to NCO District)

Pastor Matt Doerle
408 W. Findlay St.
Carey, Ohio 43316