

Fosterburg Baptist Church Presents:



“The Big Apple Adventure”

Lock-In 2012

Friday, March 2

Saturday, March 3

Registration begins at 6:00 PM

Supper provided

Pick up is 7:00 AM, March 3

4737 Fosterburg Road

Bethalto, IL 62010

618-259-2550

Permission slips available at:

www.fosterburg.org

Troy Crain, Pastor

First Baptist Church of Fosterburg
4737 Fosterburg Road – Bethalto, IL 62010 – 618-259-2550
www.fosterburg.org or fbc@fosterburg.org

Lock-In 2012
“The Big Apple Adventure”
Friday, March 2 - Saturday, March 3

Registration begins at 6:00 PM. Children ages K-6th grades are welcome to spend the night at “The Big Apple Adventure” (4yr. olds of church members may stay overnight if church member/parent is present). Bring a sleeping bag, pillow, appropriate sleep clothes in a bag **CLEARLY MARKED** (all items must be labeled, especially shoes) with your child's name. A large trash bag works well to keep items together. If you prefer not to stay all night, come for the evening's extraordinary FUN! Adults are encouraged to enjoy the evening as well. You won't want to miss the fun! At approximately 11 PM, those spending the night will begin quiet time with movies and a late night snack while others depart for home! Breakfast is served at 6:30 AM. Parents, please plan to pick up your children no later than **7 AM**.

Children and adults – you won't want to miss this event!

Cost is \$5.00 per child.

NAME: _____ Birthday(mm/dd/year): _____ AGE: _____

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NAME: _____ Birthday(mm/dd/year): _____ AGE: _____

NAME: _____ Birthday(mm/dd/year): _____ AGE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

FOOD ALLERGIERS: _____

Any MEDICAL or SPECIAL concerns: _____

Our church's medical insurance is excess insurance. If you have medical insurance, your carrier will be billed for medical charges in the case of illness or injury while your son or daughter is on a church-related activity.

MEDICAL RELEASE

In the event that I cannot be reached in an emergency during the dates specified on this form, I hereby give permission to the physician or dentists selected by the church leadership to hospitalize, to secure proper treatment, and/or injections, anesthesia, or surgery for my son or daughter as deemed necessary.

LIABILITY RELEASE

By signing this form, the parent or guardian agrees to assume and accept all risks and hazards inherent in church-related activities. They also agree to hold to First Baptist Church of Fosterburg or its employees or volunteer assistants harmless for damages, losses, or injuries to the person listed on this release (or their property), resulting from the negligence of the released parties or otherwise. The parents or guardians understand that they are signing for the minor listed on this form and the signature is for both medical and liability release.

PARENT or GUARDIAN'S SIGNATURE: _____ **Date:** _____