



# Summer Stretch 2019

A special summer program for youth completing grades 6 - 8

**WHO:** You and your friends who are completing grades 6 - 8  
**WHAT:** Devotions and service projects in the morning, and fun community activities in the afternoon  
**WHEN:** Wednesdays, 8:30 am – 4:30 pm, June 5 – June 26  
**WHERE:** Drop-off and pick-up each day at Trinity Lutheran Church, 115 N. 4<sup>th</sup> St., Stillwater, MN 55082  
**WHY:** Meet new people, have some fun, and make a difference in our community! Don't forget to invite your friends!  
**TOTAL COST:** \$120 before May 22, \$140 after May 22 (June 1 is the registration deadline)  
 (Fee includes transportation and all activities and supplies (*bag lunch June 5 & 12, food money for ValleyFair*)  
 Please contact your church for information on registering for individual days.  
**SIGN UP TODAY!:** Complete the registration form and return it with the fee to the office at the church you would like to participate with. Scholarships are available upon request. Don't delay, sign up today!



Name \_\_\_\_\_ Current Grade: 6 7 8 Phone: \_\_\_\_\_

Address \_\_\_\_\_ T-Shirt Size (adult) \_\_\_\_\_

Parent E-mail Address \_\_\_\_\_

Parent's Name(s) \_\_\_\_\_

**Office Use Only:**

Date \_\_\_\_ Amount \_\_\_\_

Check # \_\_\_\_\_ Cash \_\_\_\_\_

I know, for sure, I cannot attend Summer Stretch on the following days:

June 5    June 12    June 19    June 26 (ValleyFair Day – 8:30 am-7:00 pm)

I would like to participate in the youth group from:

- St. Paul Lutheran                       Christ Lutheran (Lake Elmo)                       Christ Lutheran (Marine)  
 First United Methodist                       Our Savior's Lutheran                       Bethlehem Lutheran (Bayport)  
 Trinity Lutheran (Trinity kids sign up online at [trinitylc.org](http://trinitylc.org))                       Other: \_\_\_\_\_

**FOR PARENTS:**

**Note: In order to make this event possible, we ask that each parent volunteer for AT LEAST one week of an activity as noted below. If you are unable to help, please find a family member, neighbor, family friend, etc. to represent your child.**

I will volunteer to drive and chaperone a small group for the service project on these days (8:30 am – 11:30 am):

June 5     June 12     June 19

How many people (in addition to yourself) can fit in your vehicle?

I will volunteer to help chaperone the large group at the afternoon activity on these days (Noon – 4:30 pm):

June 5     June 12     June 19

I am willing to help chaperone the large group at ValleyFair on June 26 (time commitment is 8:30 am – 7:00 pm)

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**SUMMER STRETCH CONSENT/MEDICAL RELEASE FORM**

- I am the parent/legal guardian of the participant, and hereby grant my permission for him/her to participate fully in all the activities of the Summer Stretch program with the St. Croix Valley Youth Ministry Association (SCVYMA), from June 5 through June 26, 2019, including service activities coordinated by Community Thread.
- In the event of an emergency, and I cannot be reached, I give permission for the supervising staff or the available adult leader to sign forms that would ensure the NECESSARY and IMMEDIATE treatment of the participant. I give permission to those administering emergency treatment to do so, using those measures deemed necessary. I furthermore absolve those acting on my behalf in this regard from liability as long as there is no gross negligence. *(Please attach a clear statement regarding the treatment of your child in the event of an emergency if different than the instructions stated in this paragraph. Sign and date it.)*
- Further, I understand that the child-participant cannot use alcohol, tobacco, drugs or firearms and if these rules are broken, I hereby assume transportation costs immediately returning the student home.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Name & Phone Number of *another* person to contact in an emergency:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone # \_\_\_\_\_

Family Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

Allergies, physical limitations, pre-existing conditions, medications currently used, other comments:

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Can we use photos of your child in SCVYMA and Community Thread publicity? (please circle one)      **Yes**    or    **No**