

OVERNIGHTER

Info: When: January 17th-18th

sunday-monday(holiday/no school)

Where: Church Youth building

110 N Gay St Susanville ca.

Time: 6pm-9:30am

Cost: \$15, and snacks/drinks to share

Bring: sleeping bag/pillow/blanket, change of clothes, any needed toiletries, \$, snacks/ drinks to share, any board games/video games/movies you would like(no R or Mature ratings!)

Activities:

Eat pizza!

Bowling!

Music by Ethan Hagen and Jake Nolen!

Fun night full of movies, games, and more!

Help?: We need Drivers from around 6:30-8:30?
As well as Parent Chaperones for the night?

Contact/
questions: Sydney Bowman 530-249-5742
Jackson Fong 530-260-7571

Registration Form

Name: (First, Middle, Last) _____

Emergency Phone #: _____ Current Grade: _____

Cell Phone # for last minute Info: _____

E-mail Address for last minute info: _____

I give _____ permission to attend
Child's Name

the Sr High Jan 2010 Overnighter with CEFC Susanville. January 17-18, 2010. I have completed the 2010 Event form and Medical waver. I agree that by attending this event I give permission for the staff to act on my behalf in the case of a medical emergency. I also confirm the use of my child's likeness for promotional and follow up use.

Parent/Guardian Name _____

Parent/Guardian Signature _____

Date _____

____ I am available to drive I can drive ____ people
(Including the driver)

____ I am able to Chaperone (Part time) From ____ to ____

____ I am able to Chaperone (The entire time)

Additional Notes: _____