CHISAGO LAKES AREA LUTHERAN CHURCHES PRESENT

**PRAY AND PLAY DAY**

**MONDAY, JANUARY 21, 2019**

**9 a.m. – 3 p.m.**

Registration starts at 8:30 a.m.

at Trinity Lutheran Church, Lindstrom

**Preschool** *(must be toilet trained)* **– Grade 5**

***What to bring:***

* *your own lunch (snacks will be provided)*
* *OUTREACH: Bring* ***canned fruit*** *or individual* ***fruit cups***

*or* ***applesauce*** *for the local School Backpack Program. Monetary offering will also go toward the School Backpack Program.*

This program provides eligible children in participating schools throughout East Central Minnesota with a bag of food containing breakfast items, lunches, two snacks, fruit and vegetables. The meals help kids get through the weekend and back to the free breakfast and lunch program at school on Monday. Family Pathways works with partner churches and parent volunteer groups to pack and distribute the bags. The goal of this school years program is to help promote school attendance, academic performance, and to improve children's feelings of self-worth.

* *Optional: Wear Beach Clothing (no swimsuits)*

**Registration Fee:** $10/child or $30/family Cash: Check:

**Registration received after January 15, 2019 will be $20 per child with no family cap.**

**EVENT WILL BE HELD AT TRINITY LUTHERAN CHURCH IN LINDSTROM.**

**Volunteers: Children are eligible for a reduced registration fee when parents volunteer.**

***CONSENT FORM:***

I hereby give my consent to have my minor child/ren participate in the 2019 Pray and Play Day at Trinity Lutheran Church.

I recognize that engaging in the activities at Trinity Lutheran Church may expose my child/ren to the possibility of physical injury.  I hereby release and agree to hold harmless Trinity Lutheran Church and its employees, organizers, and any volunteers assisting in the program, from any and all liability and claims arising out of my child/ren’s participation in programs and related activities.

In case of emergency, where I cannot be reached, I hereby authorize Trinity Lutheran Church to administer necessary first aid or seek emergency medical attention for my child.

I give my permission for my child/ren to be photographed/videotaped. I understand that the images may be displayed in church publications, church building, website and/or social media.  I understand that as a precaution, my child/ren’s names will NOT be published or linked with photographs.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Parent/Guardian Date**

**For more information or to volunteer, contact:**

Stacy Johnson: cllcyouth@frontier.com Trista Jorgensen: childrenandfamily@zionlcc.org

Sherry Holt: sherry@trinitylindstrom.org

Registrations can be turned into Chisago Lake, Trinity or Zion Lutheran.

**OVER**

**PRAY AND PLAY DAY**

MONDAY, JANUARY 21 9 a.m. – 3 p.m.

at Trinity Lutheran Church in Lindstrom

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Child**LAST Name* | *Child**FIRST Name* | *Allergies, Medical, Dietary Needs* *or Activity Restrictions* | *M/F* | *Grade* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **HOUSEHOLD INFORMATION** |
| *Parent/Guardian Names* |  |
| *Home Address* |  |
| *Phone Numbers* |  |
| *E-mail Address* |  |
| *Home Congregation* |  |

|  |
| --- |
| **EMERGENCY CONTACT INFORMATION for the day**  |
| **CALL FIRST**Last Name | First Name | Cell Phone Text: Yes No |
| *Additional Information* |  |  |
| **CALL NEXT** Last Name | First Name | Cell Phone Text: Yes No |
| *Additional Information* |  |  |

*The following person will be picking up my child:*