

AFTER SCHOOL - GOOD NEWS CLUB

MEETS: THURSDAYS 3:30 P.M. to 4:50 P.M.

AFTER SCHOOL at Greater York Baptist Church

2870 Eastern Blvd, #2908

Class in process (children may join anytime) This club will run from Nov. 7, 2024 - Apr. 3, 2025

SPONSORED BY: Child Evangelism Fellowship of York County

Contact Lisa Garlick, Director

SING SONGS, PLAY GAMES, BIBLE LESSON

CLASSES WILL BE HELD ONCE A MONTH AT Greater York Baptist Church

CEF WILL PROVIDE TRANSPORTATION FROM THE SCHOOL TO THE CHURCH. PARENTS ARE

RESPONSIBLE FOR TRANSPORTATION HOME

CHILDREN MUST BE PICKED UP BY 5:00 P.M.

REGISTRATION FORM

Child's Name _____ Boy _____ Girl _____

Parent's Name _____

Address _____ email _____

City _____ Zip _____

Home Phone # _____ Grade in School _____

Teacher _____ Any Food Allergies? _____

Family Doctor _____ Phone _____

Family Dentist _____ Phone _____

Medical Insurance Carrier _____ Group Number _____

Special Health or Allergic Conditions _____

Any Current Medications _____

Parent's Cell Phone or Work Phone # (In Case of Illness or Emergency)

I give my permission to let CEF transport my child or children from East York Elementary to Greater York Baptist Church for the After School/Good News Club.

Parent or Guardian's signature _____

Please Check I will pick up my child after club at Greater York Baptist Church. Name of person (other than parent) allowed to pick up child

I understand that there is NO club on days there is no school or on days that school lets out early.

Please return the completed After School-Good News Club form to the school office. Thank you!

Disclaimer: "York Suburban School District neither encourages or discourages a student's participation in the activity described herein."

-OVER-

-----Detach here -----

Parental Permission and Release

Please read the following statement, fill in the required information, and sign below:

I, give (name of parent/guardian) _____, give permission for (name of child) _____ to take part in the After School Good News Club Program. In case of a medical emergency I give permission to the physician selected by the CEF of York County Greater York Baptist Church to secure proper treatment. In extreme emergency circumstances they may hospitalize, order medication and, if necessary, surgery. I agree that my child is in good physical condition and able to participate in the After School/Good News Club program they are registering for. I agree to hold Greater York Baptist Church and CEF of York County, Inc. harmless, and to secure them against all losses and expenses due to injury or alleged injury to my child in relation to their participation in this program. I also assume the responsibility of any damages to the facility and/or equipment being used caused by him or her. I grant permission for any photos taken of my child to be used for future publications.

We have read the permission/release clause and agree to abide by it.

Signed _____ **Date** _____

