



# Summer Stretch Permission Slip, Summer of 2011

In consideration of Blessed Sacrament Church arranging for participation in the Summer Stretch program during the summer of 2011, the undersigned parent/guardian of

\_\_\_\_\_, a minor, hereby releases and agrees to hold harmless the above named parish or any of its advisors, chaperones or persons connected with the above activity from any liability, claims, and/or damages for personal injury, property loss/damage which may result during the event.

The undersigned \_\_\_\_\_ hereby agrees to abide by the rules established for the above event.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 2011.

\_\_\_\_\_  
Signature of Parent Signature of Participant

## Authorization for Medical Treatment

\_\_\_\_\_  
Participant Name, Birth Date

\_\_\_\_\_  
Address City, State Zip

\_\_\_\_\_  
Parent or Guardian Name, Work Phone, Home Phone, Cell Phone (please circle)

\_\_\_\_\_  
Insurance Company Policy Number

I hereby authorize the treatment, administration of anesthesia, surgical treatment(s) for my minor son/daughter \_\_\_\_\_ in the event of a medical situation occurring during my absence or when the hospital or physician(s) are unable to contact me. This authorization extends to any hospital, physician(s) and nursing personnel within the physician's staff where treatment is rendered in the physician's office. I reserve the right to hold liable the hospital, physician(s) and nursing personnel who perform medical procedures acting on the authority of this medical treatment consent form which such medical providers deem necessary for my minor child.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, and valid until the \_\_\_\_\_ day of \_\_\_\_\_, 2011.

\_\_\_\_\_  
Signature of Parent



# Summer Stretch 2011

Theme: "Stretch Out, Get Spiritually Fit"  
Participant Information  
(youth entering grades 6 - 9)



Name \_\_\_\_\_ Age \_\_\_\_\_ Grade (next year) \_\_\_\_\_

Name of friends participating in Summer Stretch: \_\_\_\_\_

Summer Stretch is NOT limited to youth at Blessed Sacrament Church. All youth who want to participate are welcome!

Participant t-shirt size (adult sizes, circle one)    **S**                    **M**                    **L**                    **XL**

T-shirt design Contest: Participants are encouraged to submit a t-shirt design for this year's Summer Stretch theme: "**Stretch Out, Get Spiritually Fit.**" The participant with the winning design wins a free t-shirt designed by them AND free Summer Stretch registration. **Design deadline is June 17.**

PARENTS, please circle the dates and times that you are available to help drive Summer Stretch participants in the morning to community service site locations and/or in the afternoon to recreation sites. We need all parents to take turns driving in order for the program to run smoothly and fairly. Specific times and locations will be given to you when the program begins. We also need you to fill out a volunteer driver form (if you have not done so in the past for other events).

Summer Stretch Dates: (each Tuesday 9:30am-3:30pm, meet in the Blessed Sacrament parish hall)  
 June 28                    July 5                    July 12                    July 19                    July 26  
 am/pm or both            am/pm or both            am/pm or both            am/pm or both            am/pm or both

Please indicate vehicle capacity \_\_\_\_\_

Mark your calendars for the End-of-Summer Activities Campout, which is tentatively scheduled for the weekend of July 22-23, 2011.

Cost of Program: \$50 (\$100 family max) paid: \_\_\_\_\_

Cost is based on \$10/week and can be adjusted based on how often you participate. *(note: if the cost of participation will be a hardship for your family, scholarship money will be made available. We do not want money to be the deciding factor in participation. Contact Jenny in the youth office at 342-3336 ext. 27 with any questions)*

*THANK YOU!*  
*~BSC Youth Office*



turn page over for  
additional information