



FAMILY SERVICE AND FUN TRIP



SATURDAY, MARCH 23 – \$5 – Scholarships available. Please see The Summit Club leaders for details.

MARCH 23 – SCHEDULE

- 8:45 Families meet at GI Free (west side of the church by the office)
- 9:00 Leave for Timberlake Ranch Camps near Marquette
Families will drive their own vehicles. 5th graders will ride in church vans driven by The Summit Club leaders.
- 9:30-1:00 Family service project and roasted hot dog lunch for everyone at Timberlake Ranch Camps
Families will drive their own vehicles home at 1:00. 5th graders will ride in church vans driven by The Summit Club leaders to Central City.
- 1:30-3:30 Clubbers and leaders swim at The Fitness Center in Central City
- 4:00 Families pick clubbers up at GI Free (west side of the church by the office)

WHAT TO WEAR AND BRING – Everyone ... wear clothes that can get dirty, sturdy shoes (no sandals or flip flops) and a jacket. Bring work gloves and water bottle. Clubbers ... bring swim wear and a towel. **Don't bring electronics.**

DAY-OF EMERGENCY CONTACT – Cristin Rhoades (402) 762-5027

CLUBBERS – Ask your parent/guardian to sign the form below, cut it off and return it, along with the \$5 registration fee, to The Summit Club leaders by Wednesday, March 20. Please have your parent keep this top part. You cannot go on the trip unless this signed form has been turned in.

Please select one...

- Family will attend. This is the total number attending, including 5th grader: _____
- 5th grader only will attend

Medical Release Form for The Summit Club Family Service and Fun Trip, Rock Solid Children's Ministries, GI Free

Authorization: I, parent/guardian of _____ give permission for my child to ride the church vans or personal vehicle of a The Summit Club leader or parent sponsor on March 23, 2024. I also hereby authorize and give permission to GI Free Church, its agents and employees, to transport my child to such physician and/or hospital as they may select, and to authorize and secure such hospitalizations, treatment, surgery and/or medications for my child as they or health care professionals involved may deem necessary for my child's well being, and to hold harmless the GI Free Church, its agents and employees, with respect thereto. I understand lifeguards are not on duty at The Fitness Center.

The health insurance company which provides coverage on my child is _____.

The policy number is _____. My child's swimming ability is _____.

In case of emergency, contact (give name and phone numbers) _____.

Signature of parent/guardian _____ Date _____