

# A GLORIOUS MESS OVERNIGHT

## EVENT DURATION:

Event begins with normal Adhesion activities at 6:30 pm Sunday, March 25<sup>th</sup>.

Please eat dinner before-hand, but there will be some late-night snacks.

Event concludes Monday, March 26<sup>th</sup> at 4:00pm.

## WHAT TO BRING:

- ❑ Sleeping bag + pillow – We WILL be sleeping, Monday will be a full day of fun and messy activities!
- ❑ Modest pajamas/clothes to sleep in
- ❑ Toothbrush/toothpaste
- ❑ Towel that can get messy
- ❑ Comfortable clothes that can get DIRTY – an extra set of clothes would also be recommended
- ❑ Bible, notebook, pen

## PARTICIPANT EXPECTATIONS:

- Inclusive of all event participants – no one will be left out
- Respect those leading activities by listening and engaging in activities with a positive attitude
- Be ready to get messy!
- ***Respect lights out time and room assignments for sleeping. Students MUST remain in assigned rooms after lights out unless granted permission from event chaperone. Failure to abide by these expectations may result in being sent home early from event.***

## CELL PHONE POLICY:

Students are welcomed to bring their phones to this event. However, please be aware there will be times students are requested to put their phones away during certain activities to help enhance the experience.

Parents/Guardians may get in contact with their son or daughter at any time during the event by contacting Valeri Schuberg (Director of Youth Ministries) at (630) 797-6625.

## PLEASE KEEP THIS FLYER FOR YOUR REFERENCE

Contact Valeri Schuberg (Director of Youth Ministries) for more information  
(630) 584-6434 x 111 or ValeriS@HosannaChurch.com

CHECK-IN ON ACTIVITIES DURING THE TRIP BY VISITING [INSTAGRAM.COM/ADHESION\\_HOSANNACHURCH](https://www.instagram.com/adhesion_hosannachurch)

Hosanna! Youth Ministries  
**A GLORIOUS MESS OVERNIGHT**  
[March 25-26, 2018]

Please complete this registration form and return it to the Hosanna! Church office **NO LATER THAN Sunday, March 11, 2018.**

**General Registration Information (one person per form please):**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Address: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

Parent Cell Phone: \_\_\_\_\_ Student Cell Phone: \_\_\_\_\_

Emergency Contact and Phone Number: \_\_\_\_\_

Allergies or Dietary Needs: \_\_\_\_\_

Medications: \_\_\_\_\_

**Participation Consent:**

I hereby certify that I give permission for the individual listed above to participate in the High School Overnight with Hosanna! Lutheran Church during the dates described above. I give permission to participate in all trip activities. The participant listed above has been instructed to cooperate with church leaders and adult volunteers and knows that failure to abide by established rules may result in removal from certain activities and, in some cases, being sent home at our expense. I consent to allow appropriate photographic and/or video images to be taken and used to promote future events or activities by Hosanna! Lutheran Church. I also agree to hold Hosanna! Lutheran Church or any directors, employees, or volunteers connected to the trip harmless of any liability related to participation in event activities. By signing this form, I authorize the assigned leaders (whether staff or volunteer) of Hosanna! Lutheran Church, or another designated person, to make decisions in their best judgment regarding any and all medical care. It is understood that effort shall be made to contact the undersigned prior to rendering emergency treatment, but that treatment will not be withheld if the undersigned cannot be reached.

\_\_\_\_\_  
Parent/Guardian Name (Printed)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date