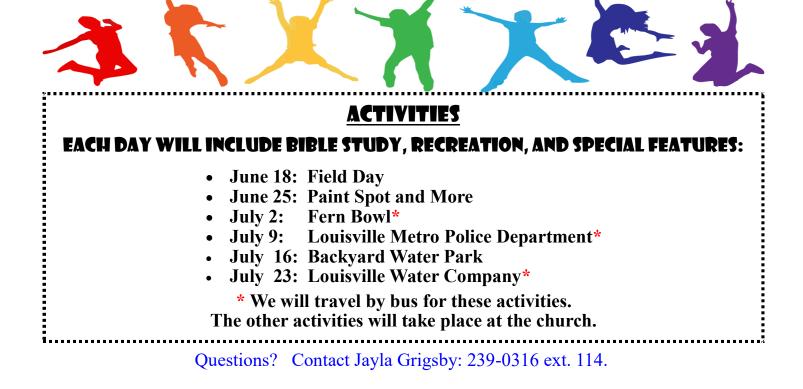
TEENJUNE 18, JUNE 25, JULY 2,JULY 9, JULY 16, JULY 23JULY 9, JULY 16, JULY 23JULY 9, JULY 16, JULY 239:00 a.m. - 3:15 p.m.(Doors open at 8:45 a.m.)Pern Creek Baptist Church5920 Bardstown RoadLouisville, Kentucky 40291

For Youth Grades 6-8 (completed)

- Please pre-register the day before your first day of attendance by mailing or bringing the attached form to the office. Or, you may choose to scan/email the form to linda@ferncreekbaptist.org. We will also accept forms on the day of registration.
- Teens are not required to attend each week to participate.
- <u>The cost is \$10 per day</u> which includes the cost of supplies, snacks, crafts, etc. Pay only on the days your teen attends.
- T-shirts are \$5. Please wear to all events.
- Each teen should bring his/her own sack lunch and drink.
- Please enter the church parking lot on the south side (service station side).
- Teens should be dropped off and picked up under the carport awning.
- A registration attendant will be there to give you instructions.



TEEN TUESDAY 2024

Name		
Address		Zip
Age Sex	Birth Date	Grade Completed
Youth Phone:	Email:	
Parents' Name(s)		
Mother Cell:	Email:	
Father Cell:	Email:	
Name of Doctor		Phone
Does your child take medicin	e regularly? If so, what medicine and h	now often does he/she take it?
Does your child have allergie	es? Yes No	
List the allergies and reaction	IS	
		If so, where?
May we have permission to p	hotograph your child for church publica	ations or website? Yes No
Who has permission to pick u	p your child after each Teen Tuesday?	
Emergency Contact		Phone
Emergency Contact		Phone

PERMISSION SLIP

My son/daughter, has permission to attend Teen Tuesday at Fern Creek Baptist Church. I understand that in giving my permission, I agree to the following:

That the approved agents for the church shall have full and complete responsibility for my child while participating in this program and may restrict or discipline his or her actions in behalf of the best interest of the church.

That I will not hold the church, or any agent thereof, responsible for any injury or accident which may occur to my son/ daughter while participating in this activity, or during transportation to and from event.

That I authorize medical and surgical treatment as needed for my child in the event that such care is required in an emergency and I am unable to be reached. In the event of such emergency care, I release the church, and all agents thereof of all liability in the event of accident or death.