



**Children's Village
Pizza/Board Game Night
At Mandy's Place**

Sunday, September 17, 2017

5:15pm-8:30pm

***ALL 9TH-12TH GRADERS ARE
INVITED TO PARTICIPATE***

JOIN US FOR an evening of fellowship, food, and fun with the residents at Mandy's Place in Pontiac, Michigan.

MANDY'S PLACE IS an emergency shelter program that provides short-term placement and support to young males and females, age birth – 17, who are the victims of abuse and/or neglect.

Contact: youthministry@stmarymilfordmi.org

or 248-685-1482 for a copy of the permission slip, or visit the website at: stmarymilfordmi.org.

PLEASE R.S.V.P BY Tuesday, September 12th—if you are interested in helping to put a smile on the faces of the kids residing in Mandy's Place.



Children's Village Board Game / Pizza Night (September 17, 2017)

Dear Parents of Legal Guardian:

Your son/daughter is eligible to participate in a St. Mary sponsored activity requiring transportation to a location away or from parish facilities. This activity will take place under the guidance and the supervision of staff from St. Mary.

NAME OF EVENT: Children's Village Board Game / Pizza Night

DESTINATION: Pontiac, Michigan

DESIGNATED ADMINISTRATOR OF ACTIVITY: Judy Vance (JV) stmaryjv@comcast.net

PHONE: 248-685-1482

DATE & TIME OF DEPARTURE: Sunday, September 17, 2017 (5:15pm)

TIME OF RETURN: Sunday, September 17, 2017 (8:45pm)

Method of TRANSPORTATION: Parents- driving (Cost: One 2-Litre Bottle of Pop)

Children's Village Board Game Night (Sunday, September 17, 2017)

I hereby consent to participation of my child _____

In the event described above. I consent to the conditions on this form and the method of transportation. In consideration of my child being allowed to participate in this event, I covenant not to sue or bring any course of action against any affiliated entity, employee, or agent for any claim caused by it or them, whether negligently or otherwise, arising out of or relating to my child's participation in this event. I also agree to indemnify, including attorney's fees, and hold harmless the parish and any affiliated entity, employee, or agent from any and all claims caused by the negligence or otherwise of it or them arising out of or relating to my child's participation in this event.

(print Parent/Legal Guardian Name)

(Parent /Legal Guardian Signature)

Date: _____ Phone # _____ Emergency Phone # _____

Address: _____ City: _____

Health Insurance Co: _____ Policy # _____

Name of Doctor (in case of emergency) _____ Phone # _____

Allergies: No _____ Yes _____ Please explain: _____

_____ Yes, I would like to chaperone the Children's Village Board Game Night

Name of adult participant: _____ Phone # _____

How many people (including driver) available in vehicle: _____

I understand that photography and/or video of participants may be procured during the event. Pictures may appear in the bulletins and newspapers as well as on the website. Please initial below.

_____ I approve of my child's picture to be published in the bulletin and/or on the website.

_____ I DO NOT APPROVE of my child's picture to be published in the bulletin and/or website.