

Good News Club® is an exciting, fun-filled weekly club for kids.

- Dynamic Bible Lessons
- Creative Learning Activities
- Inspiring Missionary Stories
- Meaningful Fun Songs
- Life-Changing Scripture Memory



Your child will learn:

- Respect for Authority
- Moral Values
- Character Qualities
- Biblical Principles

Who teaches the club? Specially trained Christians who are concerned for the spiritual well-being of your child teach the club. All club workers are **screened** as required by CEF's Child Protection Policy to ensure your child's safety.

Sponsored by:

Child Evangelism Fellowship of Illinois, Inc.:
Three Rivers Chapter

Hosted and Conducted by:

Carol Adair, Kara Paulson, Kristi Larson, Helen Brehm, Kay Hemmersbach

Start Time: 2:45 PM

End Time: 4:00 PM

Date: Every Thursday starting October 4, 2018 – April 25, 2019 —only on full days of school

Location: Saratoga School: Multipurpose Room

Who can attend? All boys and girls, grades K-5th, regardless of religious background. Parents are also welcome to attend with child. This is a free activity.

Parent /Guardian: *Please remember to send a note with your child to school notifying the bus driver that he or she will not be riding the bus home on club days.* Parents must pick up each child promptly at GNC end time. Our policies do not allow GNC teachers or helpers to remain after club. Thanks. you for understanding.

This is not an activity of Saratoga 60-C school district.

Good News Club® Registration Form 2018 – 2019

Please return completed form to School secretary.

_____ (child's name) is allowed to attend the *Good News Club* at Saratoga Elementary every Thursday after school. There will be no clubs on half days and school holidays. Club will run until April 25, 2019. Clubs will run concurrent with the school calendar. I understand it is my responsibility to pick up my child at 4:00PM.

_____ Parent /Guardian Signature

_____ Date

By signing, I agree that it is my responsibility to pick up my child at 4:00PM.

Child's **Name** (first and last): _____

School: _____ Homeroom teacher: _____ Grade: _____

Circle one: M / F Birth Date: _____ Age: _____

Street Address: _____ Apt. # _____

City: _____ State: _____ Zip: _____

List any security/custody issues with this child? _____

List any special needs (ADD, Asperger's, Dyslexia, etc.) _____

Child's allergies (peanuts, chocolate, etc.): _____

Family Email: _____ Home phone: _____

Dad's work/cell phone: _____ **Mom's** work/cell phone: _____

Church: _____ Is either parent in the military? Yes No

Emergency Contact Person 1: _____ Phone: _____

Emergency Contact Person 2: _____ Phone: _____

PERMISSION FOR PICK UP—in addition to those listed above, the following people are allowed to pick up my child:

- | | PRINT FULL NAME | CELL PHONE |
|----|-----------------|------------|
| 1) | _____ | _____ |
| 2) | _____ | _____ |

Parent/Guardian _____ (Signature of parent/guardian) _____ (Date)

_____ (Printed Name)