

Summer Stretch Sr. High Leader Application



A special opportunity for young adults completing grades 10-12.

What: Join us for this special opportunity for you to lead others into ministry. We'll get together each Wednesday from 8:30am to 4:30pm for a fun day of challenging and rewarding experiences. We'll spend the morning doing service projects, have lunch together, and spend the afternoon doing recreational activities.

Why: You will learn how to lead a small group of jr. high youth and have a great time getting to know new people, don't let this opportunity slip you by! Don't forget to invite your friends to apply also!

Who: You and your friends who are completing gr.10-12

When: Wednesdays, 8:30am - 4:30pm, June 11-July 9

Meet At Trinity Lutheran Church, Stillwater

Total Cost: \$65 (due with application by May 4)

(Fee includes transportation and all activities and supplies, but you will need to bring a bag lunch each day.)

How: Complete the application and return it with the fee (payable to SCVYMA) to the office at the church you would like to participate with. Scholarships are available upon request. Applications are **due by May 4**



Name _____ Grade: 10 11 12 Phone # _____

Address _____ Adult T-Shirt Size _____

Parent's Names _____

E-mail Address _____

Office Use Only:

Date _____ Amount _____

Check # _____ Cash _____

I know, for sure, I cannot attend Summer Stretch on the following days:

June 11 June 18 June 25 July 2 July 9 (Valleyfair Day - 8:30am-8pm)

I would like to participate in the youth group from:

- Bethlehem Lutheran Christ Lutheran (Lake Elmo) Risen Christ
 Our Savior's Lutheran Memorial Lutheran First United Methodist
 Ascension Episcopal Christ Lutheran (Marine) Trinity Lutheran
 Shepherd of the Valley

Please answer the following questions:

1. What motivates you to work with Jr. High students?
2. What kind of leadership qualities do you see in yourself?
3. In a short paragraph, describe your faith journey up to this point in your life.

Don't forget the other page... →

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4. Finally, please have your parents complete the following release form.

SUMMER STRETCH CONSENT/MEDICAL RELEASE FORM

- I am the parent/legal guardian of the participant, and hereby grant my permission for him/her to participate fully in all activities of the Summer Stretch program with the St. Croix Valley Youth Ministry Association (SCVYMA), from June 11 through July 9, 2008.
- In the event of an emergency, and I cannot be reached, I give permission for the supervising staff or the available adult leader to sign forms that would ensure the NECESSARY and IMMEDIATE treatment of the participant. I give permission to those administering emergency treatment to do so, using those measures deemed necessary. I furthermore absolve those acting on my behalf in this regard from liability as long as there is no gross negligence. *(Please attach a clear statement regarding the treatment of your child in the event of an emergency if different than the instructions stated in this paragraph. Sign and date it.)*
- Further, I understand that the child-participant cannot use alcohol, tobacco, drugs or firearms and if these rules are broken, I hereby assume transportation costs immediately returning the student home.

Parent/Guardian Signature _____ Date _____

Name & Phone Number of *another* person to contact in an emergency:

Name _____ Phone # _____

Family Physician _____ Phone # _____

Family Insurance Company _____ Policy # _____

Allergies, physical limitations, pre-existing conditions, medications currently used, other comments:

Can we use photos of your child in our church publicity? (please circle one) Yes or No