

TIE DYE NIGHT
Wednesday July 22st, 2009

7:00pm – 9:00pm

Cost is \$6donation/student

Includes Tie Dye, Fun, and games, *does NOT include T-shirt*
(this event will take place at Joy)



YOU WILL NEED TO BRING A 100% WHITE COTTON T-SHIRT
or you can purchase one from the church for \$3.50
(advanced order required)

PLEASE SIGN UP near the kitchen at church

OR

CALL THE CHURCH AT 262-5800

CALL YOUR FRIENDS AND INVITE THEM TO JOIN US!!



Please detach and return to Joy with \$6.00 donation the day of the event 07/22/09.

I _____ give permission for my child _____
(parents name/s) (students name/s)

to participate in the Tie Dye event on Wednesday July 22, 2009 at Joy Lutheran Church
7pm – 9pm

I give my consent for emergency medical care or treatment at the nearest medical
facility; to be used only if I cannot be reached immediately.

Parents
signature: _____ phone# _____

Emergency contact (other than parent)
_____ phone# _____

Please list any medical information that may be useful in an emergency.
Include history, medications, allergies, and special medical problems:

Insurance/HMO: _____ Policy # _____

Child's Physician and Medical Facility:

Doctor _____ Address _____

Phone # _____