

SUMMER

STRETCH

2022

A **FUN** Junior High Service Program

WHEN DOES IT HAPPEN?

Wednesdays from 8:30 a.m. - 4:45 p.m. for four weeks on the following days: **June 29 and July 6, 13 and 20** (Valley Fair Day is from **8:30 a.m. to 7:00 p.m.**)

WHO CAN PARTICIPATE?

Any student entering 6th through 9th grade. We also need a few qualified high school leaders who must complete a training session on **Wednesday, June 15 at 6:00 p.m.** Contact Paul if you want to be a high school leader (see below).

WHAT HAPPENS?

Youth are bused to service sites in small groups with two adults and do a morning service project and return to the church for a noon sack lunch. Then, the whole group goes out for an afternoon recreational event. Students learn about serving in the spirit of Jesus' love, and build community with each other. Probable **service sites** include the GA Food Shelf Garden, Hallie Q. Brown Center, Union Gospel Mission, Merrick Food Shelf, Cerenity Care, St. Paul Parks, Every Meal, Sally Manzara Interpretive Nature Center, and Feed My Starving Children. Probable **recreational activities** include Valleyfair, Grand Slam, St. Paul Saints, and Cascade Bay or Bunker Beach waterpark.

WHAT'S THE COST?

The fee is \$120 per junior high youth participant and \$60 for high school youth leaders. This covers bus transportation, recreational activities, and a T-shirt.

WHAT TO BRING EACH WEEK?

Sack lunch/beverage for lunch. Usually, snacks are available to purchase at the afternoon event. Students should wear closed-toed shoes every week and bring swim suits, towels, and sun tan lotion for the afternoons we go to waterparks.

FOR ADULTS:

Each family must supply an adult 21 years or older to help **one full day or two mornings (8:30 a.m. to noon)**. See adult information on page two for more details.

HOW DO I REGISTER?

Forms are attached here or on our website at **www.guardian-angels.org**. Please return completed form by **April 30** with a **\$120** check made out to "**Guardian Angels**" in an envelope marked "Attn: Paul Deziel." **Space is limited**. After April 30 the cost is \$135 if space is still available.

WHEN WILL I KNOW FINAL DETAILS?

There will be a required parent information session on **Sunday, May 22 from 10:30 to 11:00 a.m.** in the Youth Center downstairs.

QUESTIONS?

Please contact Paul Deziel by email or phone at **pdeziel@guardian-angels.org** or **651-789-3173**.



Guardian Angels
CATHOLIC COMMUNITY
Engaging in God's Service

GUARDIAN ANGELS SUMMER STRETCH REGISTRATION---2022

Student name _____ Grade entering Fall '22 _____ T-shirt Size _____ (adult sizes)

School 22-23 _____ Student e-mail address _____

Mom name & E-mail _____

Dad name & E-mail _____

Home Address _____ Home phone _____

Mom Cell # _____ Mom phone daytime _____

Dad Cell # _____ Dad phone daytime _____

Non-parent emergency contact & phone number _____

Please list one or two students they would like in their small group. We will do our best to accommodate requests.

ADULT VOLUNTEER INFORMATION

In order to run Summer Stretch we require each family supply one adult volunteer (age 21 or older) for either **one full day or two morning sessions**. In order to protect our youth, all adult volunteers must complete both a background check as well as **VIRTUS** training required by the Archdiocese (this only must be completed once in a lifetime). Background check forms will be available at our **Parent Meeting at 10:30 a.m. on Sunday, May 22**.

Indicate the name and date the adult can help with Summer Stretch **service in the morning 8:30 a.m. to 12:00 p.m.** by listing your 1st and 2nd choices on the lines below. You will be informed of your date to chaperone at the parent meeting at 10:30 a.m. on May 22.

Name _____

____ June 29

____ July 13

____ July 6

____ July 20

Indicate the name and date the adult can help with a Summer Stretch **recreational activity in the afternoon**, by listing your 1st and 2nd choices on the lines below.

Name _____

____ June 29

____ July 13

____ July 6

____ July 20

GUARDIAN ANGELS PERMISSION FORM AND MEDICAL RELEASE

Participant's Name: _____

Birth Date: _____ Gender: _____ Grade in 2022/23 _____

Parent/Guardian's Name: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

DATE/TYPE OF EVENT: Summer Stretch, June 29, July 6, July 13 and July 20, 2022.

DESTINATION: **Various service sites & St. Paul Saints, Grand Slam, Cascade Bay, Valleyfair or Bunker Beach.**

INDIVIDUAL(S) IN CHARGE: Paul Deziel. Contact pdeziel@guardian-angels.org or 789-3173

ESTIMATED TIMES: 8:30 a.m. arrive, depart at 9:00 a.m., return by 4:45 p.m. (7:00 p.m. on July 20)

MODE OF TRANSPORTATION: **Bus**

PARTICIPANT COST: **\$120 for junior high participants, \$60 for senior high leaders.**

I, _____ grant permission for _____
(Parent or guardian's name) (Child's name)

to participate in the above named activity and I warrant that my child is in good health. In consideration of my child's participation, I agree to indemnify Guardian Angels and the Archdiocese of St. Paul/Minneapolis from any claims or law suits brought against Guardian Angels Archdiocese of St. Paul/Minneapolis by myself, my child or others, that arises out of any behavior by my child at the event/activity described above. I also agree to pay reasonable attorney's fees or expenses incurred by Guardian Angels and Archdiocese in defense of such a claim/law suit.

EMERGENCY MEDICAL TREATMENT: In the event of an emergency, I give permission to transport my child to a hospital for emergency medical treatment. I wish to be advised prior to any further treatment by a doctor or hospital. In the event of an emergency, if you are unable to reach me at the above numbers, contact:

Name: _____ Phone number: _____

MEDICAL INFORMATION:

Medication my child is taking at present: _____

Family Health Plan carrier name: _____

Family Doctor: _____ Phone number: _____

As parent or guardian, I agree to all of the above stated considerations and conditions.

(Signature)

(Date)