



# MSM Spring Break Local Missions March 19-21, 2012

- Cost:** \$35 - Deadline is March 7
- Drop Off:** March 19 at the CCC Community Center  
8 am (2208 W. Hefner Rd.)
- Pick Up:** March 21 at CCC Community Center at  
12:30 pm
- Bring:** Air mattress/bedding  
Toiletries/towels  
Bible/pen  
Gym clothes/Work clothes  
Comfortable work shoes/gym shoes  
Money for snacks/sodas (or bring your own)  
Money for 2 lunches (breakfast & dinner provided)

**Meeting times (required):**  
March 7 - Parent and Student  
March 14 - Student

\*Meetings are in the MS Theater from 8 - 8:30 pm

**Space Is Limited to 40 Students!**

## MSM Spring Break Local Missions Medical Release/Permission Form

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_  
Gender \_\_\_\_\_ School \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Are you visiting CCC \_\_\_\_\_? Church home \_\_\_\_\_

*I give permission for my above named child to attend Middle School Ministries Spring Break Local Missions experience March 19-21, 2012.*

***I understand the group will be traveling in vans with adult leaders.***

*I hereby release Crossings Community Church, it's staff and volunteers from any and all liability for any injury or illness that my child might sustain during this activity. In the event of an emergency, I hereby authorize an adult leader of this activity, to act as an agent for me to consent: to an x-ray examination; to medical, dental or surgical treatment; and to hospital care advised and supervised by a physician, surgeon or dentist (as appropriate) licensed to practice under the laws of the state where the services are rendered, whether at a doctor's office or any hospital.*

*I also acknowledge and agree that all financial debts incurred are my responsibility and not that of CCC, their staff, or volunteers.*

Signature of Parent or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile # / Pager # \_\_\_\_\_ Other phone \_\_\_\_\_

Medical allergies: \_\_\_\_\_

Insurance Carrier \_\_\_\_\_ Policy/Group # \_\_\_\_\_

Date of last Tetanus Shot \_\_\_\_\_