		New	s (CLUB	Rally	
	Who: Children ages 5-12					
the pupp		RY WORKS	When:	Saturday, April 10:00 a.m 12:	6, 2019 30 p.m.	
				53 BLUE HILL, NOF (570) 473-9400 / (RTHUMBERLAND, PA 17857 office@gncnc.org / www.gnci	nc.org
Lemma .		A FIS	What:	Puppet Show • Prizes • Face Pa	County Fair • Hot Dogs ainting • Ice Cream	
For 1	ism, Stories. The whole for	onge . Mimo	How:	<u>Clip & sign</u> the <u>RETURN to to t</u> office by March	permission slip below ar <u>he Good News Club</u> 1 <u>26.</u>	nd
	Transportation is available! Below are our bus pick-up points Contact the GNC Office for pick up and drop off times					
	Baugher (Miltor Montandon Ele Turbotville Elen Shamokin Elen Mount Carmel I	mentary nentary nentary	Grace I Chief S Oaklyn	ountain Elementa Beck Elementary hikellamy Elemer Elementary y Elementary		
*	At	filiated with Child Evange	ELISM FELLC	WSHIP OF EASTERN PA	, INC.	
 GOOD NEWS CLUB RALLY PERMISSION SLIP (FILL OUT COMPLETELY) Please check each box that applies: I give permission for my child(ren) to attend the Good News Club Rally on April 6, 2019. I hereby authorize GNC workers to furnish necessary examination and treatment to my child(ren) named hereon if I am not available. I acknowledge and accept the risks of injury associated with participation in and transportation to and from the activity. I accept personal financial responsibility for any injury or other loss sustained during the activity or during transportation to and from the activity, as well as for any medical treatment rendered to my child(ren). I hereby release GOOD NEWS CLUB, INC. OF NORTHUMBERLAND COUNTY, its board, and Good News Club staff and volunteers that work for them from any liability under the circumstances that may be present, including accident, injury, or illness during the rally event. I give permission for my child(ren) to be included in any photographs, video and/or website publications that might be used in GOOD NEWS CLUB, INC. ministry promotion. If my child(ren) has any allergies or medical concerns, I have listed them on the back of this form. 						
Parent/Guar	dian Signature			Phone	#	
PRINT parent/guardian's name						
PRINT name(s) of child(ren) who plan to attend						
 My child/children will use bus transportation. Pick-up Point (listed above):						
Emergency	Contact			Phone	#	

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