

TEEN NIGHT for Junior Highers

Saturday, February 11 ~ 7pm-9pm

St. Matthew ~ Chapel Building

Fun

Games

Did we say FUN??

Fun



Prizes

Pizza

Service Projects



Tell Friends & Bring Friends!

Tell Friends that this is the place to be on

Saturday Night, February 11 ~ 7pm-9pm

**Permission slip required & to be returned by February 6
to the Religious Education Office.**

Any questions call the St. Matthew Religious Education Office at
847-891-1220 or e-mail tkotowski.stmatthew@gmail.com

Permission Form completed by parent/guardian for **TEEN NIGHT**
SATURDAY, FEBRUARY 11, 2012 ~ 7:00pm-9:00pm
St. Matthew Parish, Chapel Building

I give permission to my son/daughter (PRINT participant's name) _____
to participate in the event sponsored by St. Matthew Parish. I hereby release and indemnify the Archdiocese
of Chicago, St. Matthew Parish for this event, its staff and volunteers; and the Catholic Bishop of Chicago, a
Corporation Sole, from any and all liability arising from claims of any kind or nature whatsoever from my
child's participation in the program. I understand that if my child violates any laws regarding possession of
alcohol or drugs, or rules governing the event, I will be called and notified about the situation and/or
arrangements made to send my child home.

We will send an e-mail confirming your participation in this event to the address you provide below:

_____ **E-Mail**

MEDICAL AUTHORIZATIONS

In the event that the undersigned cannot be reached, and in the judgment of the responsible adults or other
appropriate staff members accompanying the group that there is a necessity for immediate examination
and/or treatment of my child, I hereby authorize any of the aforesaid personnel to obtain for my child such
medical services as are deemed necessary.

Parent/Guardian Signature

Date

EMERGENCY CONTACT - Parent(s)/Guardian(s):

NAME OF EMERGENCY CONTACT _____

Relationship _____ Phone Number: _____

(#2) Phone Number: _____

Address _____ City _____ State _____ Zip _____

HEALTH INFORMATION

Allergies: _____

Current Meds: _____

Other Comments: _____ School you Attend: _____

Fun service projects during the evening will include the Linus Blanket (*the no-sew blanket*) project and or making some
Easter cards for the elderly and to those who you could bring a smile to this coming Easter season.

Interested in finishing a Linus Blanket? YES _____ NO _____

Interested in making some Easter cards? YES _____ NO _____

Return this completed form to the Religious Education Office by: **February 6, 2012.**

Questions?? Please contact the Religious Education Office (847) 891-1220 or

tkotowski.stmatthew@gmail.com