



## *2018 Sr. High Lock In* *November 30 – December 1 (7 pm to 12 pm)*

When: Friday November 30, 7:00 pm – Saturday December 1, 12 pm  
Where: Diocesan Ministry Center – 1064 Brighton Rd, Tonawanda, NY 14150

Details: This is a chance for those in 8<sup>th</sup> grade through 12<sup>th</sup> grade can gather, play, dig into our faith, and get to know each other. The evening will consist of several engaging activities that will spark discussion.

Cost: \$15

To Register: Email Wendy at [wschumacher@episcopalwny.org](mailto:wschumacher@episcopalwny.org). The permission slip and event fee can be brought the night of the event.

Bring with you: Appropriate Sleepwear, and change of clothes, and bedding to sleep on.

Questions: Contact Wendy at [wschumacher@episcopalwny.org](mailto:wschumacher@episcopalwny.org)

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Grade in School: \_\_\_\_\_

Congregation: \_\_\_\_\_

### Parent or Guardian Information

Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Additional Emergency Contact & Number: \_\_\_\_\_

Special Needs (Diet, physical assistance etc.): \_\_\_\_\_

Allergies: \_\_\_\_\_

Medications: \_\_\_\_\_

Release

In case of medical emergency, I understand that every effort will be made to contact the parent or guardian. In event I cannot be reached, I hereby give permission to the dentist or physician designated by the staff to hospitalize, secure proper treatment and/or to order an injection, anesthesia, or necessary surgery. I hereby give permission to the representatives of the Episcopal Diocese of Western New York to transport my minor child in private automobiles and/or vans. I hereby release and waive any claims I may have for injuries to such minor child including claims for medical treatment expenses for such minor child against any such person and the Diocese for their failure to exercise due care in transportation to and from and participation in such special trips. I do not waive or release claims that may arise from intentional, wanton, or willful misconduct by such staff or volunteers. I give permission for pictures of my minor child to be used in **diocesan** publications and web-based services.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Throughout the event, pictures and videos may be taken. The media gathered at the event will be solely for promotion of the First Thirty Events. I give permission for pictures and video, taken by the adult volunteers, of my minor child to be used in **diocesan** publications and web-based services.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_