

SuperStart!

February 3 -4



SuperStart! is for all 4th-6th grade students.

SuperStart! is only \$55 per student. Deadline to register Sunday, January 22. Cost includes all of the weekend activities including our Bowling Party, which includes 2 slices of pizza and a small soda for lunch, 2 games of bowling, shoes, and bus transportation. Please return this registration packet along with your payment to any welcome center. Online payment and forms are also available to download at crossroadschristian.net

We are excited that Crossroads is hosting "Superstart! Live" on the weekend of February 3-4, 2012. This is a CIY (Christ in Youth) event for all 4th-6th grade students.

Preteens are in transition from childhood to adolescence. As they prepare to make this transition, they begin to search and discover the answers to questions like, "What am I good at?" and "Where do I fit in?" But what they are really trying to discover within themselves is, "What am I here for?" Preteens often try to answer this question through athletics, academics, talents, and relationships.

This year at SuperStart!, our aim is to help your preteens understand that the true answer to this question can only be found in God. By looking at Romans 11:36, we'll help them understand that they were truly made by God, through Christ, and ultimately for His glory.

Get ready for your preteens to experience the wild and wacky SuperStart! MAD LAB. They will get to meet and interact with a crazy mad science team as they perform educational yet mind blowing science demonstrations. Mix that together with worship and Biblical teaching and you get a weekend full of laughing, learning, and coming to know the true purpose of what God made us to do.

Yancy will be here to lead us in Praise and Worship!

Friday Night Schedule

5:45 PM CCC Student Drop Off
6:00 PM Superstart! Zone Opens
7:30 PM Main Session Begins
9:30 PM Superstart! After Party
10:15 PM CCC Student Pick Up

Saturday Schedule

7:45 AM CCC Student Drop Off
8:00 AM Superstart Zone Opens
8:30 AM Main Session Begins
10:00 AM CCC kids leave for AMF bowling & lunch
1:00 PM Superstart! Zone Opens
1:30 PM Main Session Begins

SuperStart! Volunteer Opportunities

We are needing adult volunteers to assist the CIY staff in their operations and Crossroads needs adult volunteers to assist Children's Ministry with our own CCC kids attending the event. If you are available and would like to join in the fun, please contact the Children's Ministry Department at 817-557-2277 or at Crossroadskids@crossroadschristian.net

SuperStart!

February 3-4

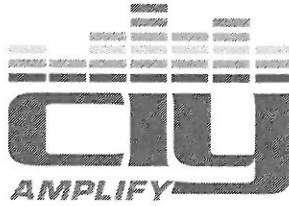
Parents, the attached release forms **MUST** be filled out completely, signed and returned along with payment. **Your child(ren) will NOT be registered for the event until the release forms are turned in and payment is made.**

Total Enclosed \$ _____ Cash or Check# _____ Date Paid _____

Child's Name _____ Age/Grade _____

Child's Name _____ Age/Grade _____

Child's Name _____ Age/Grade _____



Christ In Youth Discipline, Liability & Medical Release Form

Make a copy for yourself and bring the ORIGINAL to registration

Event you will be attending:

- Know Sweat Missions Trip believe move SuperStart! Discipleship
 Wilderness Elevate On Purpose Mission Leader Training Trip

Please check which one best describes your attendance:

- Sponsor Student Youth/Children's Minister

Participant Name _____ Male Female

Address _____ City _____ State _____ Zip _____

Participant email _____ Home Phone _____ H.S. Graduation Year _____

Church You are Attending with (missions trip n/a) _____

City/State _____ Group Leader's Name (missions trip n/a) _____

Health Insurance Company _____ Policy Number _____

Known Allergies and Reactions _____ Medications Currently Taking _____

Parents/Legal Guardians Name (with whom you live) _____

Emergency Contact Info of Parent/Legal Guardian:

Cell Phone _____ Parent(s) email _____

Person to notify if parent/legal guardian cannot be reached:

Name _____ Relationship _____ Phone _____

I, the parent or legal guardian of the participant listed on this form, certify that he/she has my full approval to participate in this Christ In Youth Program. The individual identified on this form understands that all participants are expected to abide by the Program rules and be directly responsible to the Christ In Youth Program Director. The Christ In Youth Program Director assumes responsibility for discipline at the Program and, if necessary, may, because of misconduct or disobedience, require a participant to leave. In such instance, I will assume full responsibility for returning the participant home.

Further, I do release and hereby agree to hold blameless Christ In Youth and its employees and agents from any and every claim arising, or which may be asserted by me or by any member of my family by reason of participating in any activities associated with Christ In Youth Programs. I also release the lessor/owner of properties on which the Program is held. **I agree to pay for any damages or property loss as determined by Christ In Youth or campus officials, including any keys not returned at the time of group check out.**

Further, I do authorize the minister or sponsor of this activity or any Christ In Youth staff member, in the event I cannot be reached by phone, to give consent to a physician and/or hospital for emergency medical or surgical treatment while on this trip. It is understood that I will assume any financial responsibility for any expense that may be incurred for said emergency treatment.

Further, I authorize Christ In Youth to use photographs and video footage of the participant for promotional materials.

Further, I do certify that said participant is covered by adequate accident insurance. My consent and signature is given below. I have read and agree to the information given in this entire form.

Signature of Participant Named Above _____

(If under 18 parent or legal guardian must sign)

Printed Name of Parent/Legal Guardian _____ Date _____

Signature of the Parent/Legal Guardian _____

Several Christian Colleges appreciate receiving the names of young people who attend Christ In Youth programs. If you prefer that the information about the above named individual NOT be passed on to any of these colleges, please check this box.

From time to time, Christ In Youth uses the information above to update parents regarding ministry successes and opportunities. If you prefer to NOT receive these updates, please check this box.

Crossroads Christian Church
6450 South Highway 360 • Grand Prairie, TX 75052 • 817.557.2277

**RELEASE, DISCHARGE, WAIVER
AND HOLD HARMLESS AGREEMENT**

Children's Names: _____

Address: _____

City/State/Zip: _____

Home Phone: _____ Work Phone: _____ Email: _____

I do hereby release, acquit, hold harmless, and forever discharge Crossroads Christian Church, its agents, servants, sponsors, employees, and all persons natural or corporate in privity with them, from any and all claims or causes of action, including but not limited to actions, suits and/or claims for bodily injuries, death or property damage, while participating in any activity, including travel to and from any church activities. This agreement also applies to any and all activities on or off church property including, but not limited to the use of racquetball courts, gymnasium and baseball fields.

In the case of injury or sickness, I hereby authorize notification of a physician and give permission to said physician or designated medical professionals to administer emergency medical assistance if I cannot be reached. The undersigned agrees to assume liability for any and all costs and expenses incurred including medical and dental costs in the event an injury or claim arises. The undersigned further represents by the signing of this agreement that the subject participant has adequate health, disability and life insurance and further acknowledges that Crossroads Christian Church does not provide health, disability or life insurance for the subject participant.

The undersigned further agrees that should the need arise for any transportation, lodging and/or meals for participant, because of some unforeseen event, including but not limited to, the breakdown of church, employee or sponsor vehicles, chartered vehicles, or if transportation becomes necessary for medical emergencies, the undersigned shall be responsible for such costs.

If for any reason legal action is taken against Crossroads Christian Church, by the undersigned participant, parents, or guardian, the undersigned agrees to assume any and all legal costs and expenses incurred by Crossroads Christian Church in the event that it successfully defends such claim, action or lawsuit.

I assume full responsibility for any damage to property and/or equipment owned or leased by Crossroads Christian Church during any of the aforementioned activities and understand I will be responsible for replacement of same.

Photos or video taken of my child(ren) during any event may be used to promote and/or report on the event in any Crossroads' advertising, publications or media.

_____ Health Insurance Company	_____ Participant*	_____ Date
_____ Policy Number	_____ Father's Signature	_____ Date
_____ Emergency Phone Numbers	_____ Mother's Signature	_____ Date
() _____	_____ Legal Guardian	_____ Date
() _____		

* If participant is under the age of eighteen (18) years of age, this Release must be signed by mother, father or legal guardian.