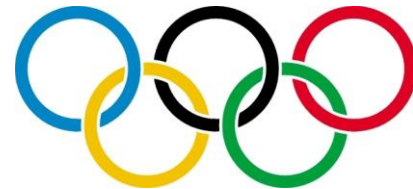


CHISAGO LAKES AREA LUTHERAN CHURCHES PRESENT  
PRAY AND PLAY DAY  
MONDAY, JANUARY 22nd 9 am – 3 pm  
Registration starts at 8:30 am  
at Chisago Lake Lutheran in Center City  
Preschool – Grade 5 (must be toilet trained)  
Registration Form

**What to bring:**



- *your own lunch (snack will be provided)*
- *Hygiene item for homeless:  
Toothbrushes, toothpaste, soap, shampoo, etc.*
- *Bring outdoor clothes: we will go outside for some "Olympic" games if the weather permits*



**Registration Fee:** \$10/child or \$30/family      Cash:\_\_\_\_\_ Check:\_\_\_\_\_

Registrations received after January 14<sup>th</sup> will be \$20 per child with no family cap.

EVENT WILL BE HELD AT CHISAGO LAKE EV LUTHERAN IN CENTER CITY

**Volunteers:** Children are eligible for a *reduced registration fee* when parents volunteer.

**Photo Release:** CLLC occasionally has the opportunity to use photos to promote the VBS program. Uses might include slide shows, display boards, church newsletter, church website, church facebook page, press releases, etc. No Names will be used with any photos. Do you give CLLC, Trinity and Zion permission to include your family in photos used for informational and promotional purposes? (Circle)    Yes    No

**Medical Release:** In the event of an emergency, I hereby authorize Chisago Lake Lutheran Church, it's staff and volunteers to take any steps they deem necessary to obtain emergency medical care for members of my family, and I hereby release Chisago Lake Lutheran Church and it's Representatives from any financial liability incurred during such emergency treatment.

**I have read and agree with the above:**

\*Name:\_\_\_\_\_Signature:\_\_\_\_\_Date:\_\_\_\_\_

**For more information or to volunteer, contact:**

Stacy Johnson: [clicyouth@frontier.com](mailto:clicyouth@frontier.com)      Sherry Holt: [sherry@trinitylindstrom.org](mailto:sherry@trinitylindstrom.org)  
Trista: [childrenandfamily@zionlcc.org](mailto:childrenandfamily@zionlcc.org)

Registrations can be turned into Chisago Lake, Trinity or Zion Lutheran.

**PRAY AND PLAY DAY**  
**MONDAY, JANUARY 22<sup>nd</sup> 9 am – 3 pm**  
**at Chisago Lake Lutheran in Center City**

Child LAST Name	Child FIRST Name	M/F	Grade

*Home Phone:* \_\_\_\_\_ *Home e-mail:* \_\_\_\_\_

*Allergies / medical conditions / special needs / activity restrictions/ additional concerns:*  
 \_\_\_\_\_  
 \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION for the day**

<b>CALL FIRST</b> Last Name	First Name	Cell Phone      Text: Yes   No
<i>Additional information</i>		
<b>CALL NEXT</b> Last Name	First Name	Cell Phone      Text: Yes   No
<i>Additional information</i>		

*The following person will be picking up my child:* \_\_\_\_\_  
 \_\_\_\_\_