



# All-Stars for JESUS

2009-2010

3<sup>rd</sup>, 4<sup>th</sup>, & 5<sup>th</sup> Graders

2<sup>nd</sup> and 3<sup>rd</sup> Wednesdays  
September-May

5:30-7:00p.m.  
Fellowship Hall



Join us for Bible Study, Fun and Games,  
Friendship and much more! Dinner is  
provided (suggested donation of \$3).

**The United Methodist  
Church of Libertyville  
429 Brainerd Avenue  
847-362-2112**

## Registration

**Parent/Guardian**  
Names: \_\_\_\_\_  
Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_

I prefer to be contacted by \_\_\_ phone \_\_\_ e-mail

**Child**  
Name: \_\_\_\_\_  
School: \_\_\_\_\_  
Grade: \_\_\_\_\_ Birthday: \_\_\_\_\_

**Medical Information**  
Allergies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other Information:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If your child will be regularly leaving  
with an adult that is not the above  
listed parent/guardian, please indicate  
below.**

\_\_\_\_\_  
\_\_\_\_\_

## How Can You Help?

**We ask that parents volunteer for 2  
meetings during the year, when  
possible. More frequent leadership  
is always appreciated! Sign ups will  
be available on at All-Stars events,  
however we appreciate your  
advanced sign-up below.**

\_\_\_\_\_ **Meals (5:10-6:10)**  
**Set-up, serve and clean up**

\_\_\_\_\_ **Lesson/Games (6:10-7:10)**  
**Assist in leading, set-up and  
clean up**

_____ <b>Sept.</b>	_____ <b>Jan</b>
_____ <b>Oct</b>	_____ <b>Feb</b>
_____ <b>Nov.</b>	_____ <b>March</b>
_____ <b>Dec</b>	_____ <b>April</b>
	_____ <b>May</b>

**Occasionally there are other opportunities to  
serve, such as organizing supplies, and  
purchasing items. If you would be interested  
in this or another opportunity, please feel free  
to list that below.**

## Medical/Permission Release

I, \_\_\_\_\_  
Give my consent for my child to participate in the All-Stars for Jesus ministry at the United Methodist Church of Libertyville. I will not hold the church or staff responsible for injuries resulting from accidents. I understand that my child will participate in a number of activities, including indoor and outdoor games. \_\_\_\_\_(initial)

I also understand that in the case of a medical emergency involving my child, the United Methodist Church of Libertyville will attempt to notify me. If the church cannot reach me, I authorize the church to transport my child to a medical facility and to provide any and all necessary medical services. I agree to pay any medical expenses so incurred. \_\_\_\_\_(initial)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

## Emergency Contact Information

### Parent/Guardian

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

Cell: \_\_\_\_\_

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

Cell: \_\_\_\_\_

### Alternate Emergency Contacts

In the event you cannot be reached, whom can we contact?

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

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

Relationship to Family: \_\_\_\_\_

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

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

Relationship to Family: \_\_\_\_\_



Dear All-Stars and Parents,

I can't wait for this year of All-Stars to begin! My prayer is that we will have a great year of food, friends and fun as we grow in God.

Friends are always invited to attend All-Stars, so don't forget to pass this along to anyone interested.

Please feel free to contact me if you have any questions!

I look forward to seeing you!

Grace and Peace,

Rev. Jessica Duncan  
Director of Christian Education

Phone: 847-362-2112 ext 5

E-mail: [duncan.jessica@sbcglobal.net](mailto:duncan.jessica@sbcglobal.net)