

NOVEMBER 2011

STUDENT NEWS

I WANT TO

BE FIRST

DISCIPLE NOW 2011 NOV. 18-20 GRADES 7TH-12TH

EVENT DETAILS

- When: Friday November 18th at 8PM
Where: Lake Valley Community Church
Stay: In Host Homes (Families of Lake Valley)
Worship: The Sean Michel Band
Speaker: Keith Chancey from Kanakuk Camps
Cost: \$60 all included: DUE ASAP
What: Great speaking, worship, service projects, and fun!

How to Sign UP:

Turn in permission form and money to Ben or the church office.
Friday night the 18th bring **sleeping bag, pillow, clothes and towel** to church. You will be done after second service Sunday morning.



Calendar



This is our regular gathering and equipping time for grades 8th-12th. We eat together, and have worship, teaching, and small group. It is a dynamic format and changes weekly, but times stay the same

WHEN? Every Wednesday 6-8PM

Nov. 2 – SHAPE Series
Session 1: SPIRITUAL GIFTS

Nov. 9 – SHAPE Series Session 2:
HEART

Nov. 16 – SHAPE Series Session 2:
ABILITIES

Nov. 30 – SHAPE Series Session 3:
PERSONALITY

Dec. 7 – SHAPE Series Session 4:
EXPERIENCES

Dec. 14 – CHRISTMAS PARTY!!!!

CONNECT
Learning Center for
7th-12th
9-10am
in The Lounge

Future Dates:

Nov. 18-20 Disciple Now
Weekend

February 3-5 Shiver Retreat

March 19-23 Spring Break

Mission Hot Springs

April 22 – Church at the Park

Haiti Mission Trips – 2 for next
summer dates: TBD

ASCENT FOOD OPEN DATES

Dec. 14

Jan 4, 11, 18, 25

Feb 1, 8, 15, 22

Help feed our hungry
teens. You provide main
dish and we provide every
thing else. Contact Ben
or office for details

THE TRIBE

6TH-7TH MINISTRY

LED BY BECCA HELTON

THEY SHARE A MEAL WITH 8TH-12TH AND THE
LEADERS

SPECIFIC TEACHING AND SMALL GROUP TIME FOR
THEIR GRADE

Nov. 2 – “WHAT I AM CREATED TO DO”

Nov. 9 – “GOD THE FATHER OUR PROVIDER”

Nov. 16 – “GOD THE SON OUR SAVIOR”

Nov. 30 – “GOD THE HOLY SPIRIT OUR

Parental Consent/Medical Treatment Form

Name of Church: Lake Valley Community Church – Ascent Student Ministries

Adult/s Leading Event: Ben Kilgore, PLUS Drivers, and leaders

Event: Disciple Now Weekend, November 18-20

I, the undersigned parent or guardian of _____, a minor, do hereby authorize adult workers with the student of the above named church to consent to any examination, x-ray, anesthetic, medical or surgical diagnosis or treatment and hospital care which is rendered under supervision of any physician or surgeon licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

Further, as parent or guardian of the minor named above, I do hereby expressly consent that my son/daughter may receive emergency medical treatment from any physician, hospital, or other medical center without the necessity of first notifying me, and do further agree to hold blameless any physician, hospital or other medical center for rendering such services.

Allergies Food, Medical / ETC?

Regular Family Physician: _____

Other Information: _____

(Please print the following information)

Name of Participant: _____

Grade: _____ T-Shirt Size _____

Gender: M / F

Parent or Guardian: _____

Address: _____

Primary Phone: _____ Secondary Phone: _____

Signature of Parent or Guardian

Date

My signature confirms that I hereby give witness to the proper completion of this form by the minor's parent or guardian.