Join the 3rd & 4th grade Sunday school class for a...

PIZZA PARTY!! Friday, May 17th 5:30-8:00

Pizza, chips, fruit, drinks, and dessert provided.

Outdoor games, Movie

& smore's time!

Please bring \$5 for costs.

Party will be at Anita Mills' house:

12560 Davis Lane

Nevada City, CA

PLEASE RSVP by Tues. May14th

Call Anita at 273-0761 if your child will attend



Pizza Party Friday, May 17, 2024 CALVARY BIBLE CHURCH Permission Slip and Release Please read carefully before signing

I know my child needs to have a med	lical release on file, new to 2024
Participant's name (please print):	Phone:
I expressly consent to the participant's involven 2024. The participant agrees to comply with all	nent in the Pizza Party , scheduled to take place on <u>May 17,</u> rules and policies for this activity.
California. I understand and agree that the ve owned by Calvary Bible Church. I am f transportation and understand that accidents	rental car, etc. with Calvary Bible Church of Grass Valley, hicle in which he/she/they may be traveling may not be familiar with the dangers associated with vehicular are common. I also understand that the consequences which may be permanent and can even result in death.
limited to, playing games, wildlife, swimming,	d may participate in various activities including but not being outside, etc., and other activities associated with vities involve inherent and other risks of injury and death.
for the participant being permitted to be invo- 2024, I agree to release Calvary Bible Church a workers, attorneys, agents, representatives, a "Providers") from all liability, in excess of the Providers, for injury, death, and property loss a	and event involves inherent and other risks. In consideration lived in the activities and events during the calendar year and its pastors, elders, officers, staff, employees, volunteer affiliates, successors-in-interest, and assigns (collectively applicable limits of any insurance providing coverage to and damage that arises out of or results from the activities from the negligence of Providers, or any other person or
agreement to mediation and, if mediation is no and legally binding arbitration will be conduct	arises out of, or results from any activity or event or this of successful, to legally binding arbitration. The mediation ed in accordance with the <i>Rules of Procedure for Christian</i> stion. Judgment upon an arbitration award may be entered
however our policy regarding sexuality and qunderstanding of Christian sexuality, which is restudents participate with their biological gende	ifferences with regard to gender and identity in this world, gender identity is grounded in the historically traditional poted in the Bible (Genesis 1:27). Therefore we will have all r when it comes to gender divided activities. This includes, ments, bathroom use, small groups, appropriate dress, etc.
acknowledge this agreement is governed by th	pant's heirs, executors, administrators, and assigns. I e applicable laws of the State of California. If any provision o be unenforceable for any reason, the remainder of that verable and remain in effect.
RELEASE, AND MEDIATION AND ARBITRATION	TARILY AGREE TO THIS LIABILITY RELEASE, MEDICAL N AGREEMENT. I VERIFY THAT I AM THE PARENT OR AVE AUTHORITY TO ENTER INTO THIS AGREEMENT ON
Participant's Signature:	Date:
Parent/Guardian: If participant is a minor, I ver authority to enter into this agreement on behalf	ify that I am the parent or guardian of the minor, and I have of the participant.
Parent/Guardian's Signature:	Date:

CALVARY BIBLE CHURCH, 2024 Medical Release Please fill out carefully and sign

Participant's name (please print): Jonah Arb	paughBirth Date: 11-29-10
Address: 13790 Family Circle	
City, State, Zip: Grass Valley, CA 95945	Phone: 530-559-4745
Allergies: none	
Medical conditions (e.g., asthma, diabetes,	hemophilia, epilepsy, allergies, etc.):
Medications Instructions	
Туре	_Dosage
Health Insurance Co.: Anthem Blue Cross_	
Doctor Dr Harris	Phone 530-272-9770
Policy No.: CPR934A79087	Group/ID No.: DB250G
Policy Holder's Name: Micah Arbaugh	Policy Holder's DOB: 4-29-82
Parent/guardian's name: Micah & Andrea A	rbaugh
Home phone: 530-477-1810 Micah's Cell:	530-559-9275 Drea's Cell: 530-559-7773
Email: drearbaugh@yahoo.com	
administer first aid to the participant, as the care and transportation to a medical fa participant's well-being, at my expense. I a	LVARY BIBLE CHURCH, or any activity or event, to by deem necessary. I authorize medical and surgical cility or hospital for treatment necessary for the authorize the supervisors in the youth department to for my child. I also agree, if necessary, that I will pay because of a disciplinary action.
AND I VERIFY THAT I AM THE PARENT	UNTARILY AGREE TO THIS MEDICAL RELEASE, OR LEGAL GUARDIAN OF THE MINOR, AND I IS AGREEMENT ON HIS/HER/THEIR BEHALF.
Parent/Guardian's Signature:	Date:
2024 I authorize any person connected with CAI post group photos of events and activities	Y BIBLE CHURCH, Photo Release LVARY BIBLE CHURCH, or any activity or event, to that I or my child may be in on the Calvary Bible media sites connected to Calvary Bible Church.
Parent/Guardian's Signature:	Date: