

echo youth min

# IGGY

CHRISTIAN AFTER-SCHOOL  
PROGRAM

PROVIDE SNACKS/LESSON/GAMES

TRANSPORTATION PROVIDED FOR  
EAST & WEST INTERMEDIATE

COME HAVE FUN!!!

THURSDAYS 4-5:15PM



# IGGY OPEN GYM

TUESDAYS

AFTERSCHOOL UNTIL 5:15PM

WE PICK UP FROM THE SCHOOL PICK UP  
LINE

KICKBALL||DODGEBALL||VOLLEYBALL||SOCCER||BASKETBALL

| August    | Events   |
|-----------|--|
| Aug. 15th | Iggy Afterschool 4:00-5:15pm--WELCOME TO IGGY PARTY!!! |
| Aug. 20th | Gym Day 4:00-5:15pm                                    |
| Aug. 22nd | Iggy Afterschool 4:00-5:15pm                           |
| Aug 27th  | Gym Day 4:00-5:15pm                                    |
| Aug. 29th | Iggy Afterschool 4:00-5:15pm                           |

| September  | Events                       |
|------------|------------------------------|
| Sept. 3rd  | Gym Day 4:00-5:15pm          |
| Sept. 5th  | Iggy Afterschool 4:00-5:15pm |
| Sept. 10th | Gym Day 4:00-5:15pm          |
| Sept. 12th | Iggy Afterschool 4:00-5:15pm |
| Sept. 17th | Gym Day 4:00-5:15pm          |
| Sept. 19th | Iggy Afterschool 4:00-5:15pm |
| Sept. 24th | Gym Day 4:00-5:15pm          |
| Sept. 26th | Iggy Afterschool 4:00-5:15pm |

| October   | Events                       |
|-----------|------------------------------|
| Oct. 1st  | Gym Day 4:00-5:15pm          |
| Oct. 3rd  | Iggy Afterschool 4:00-5:15pm |
| Oct. 8th  | Gym Day 4:00-5:15pm          |
| Oct. 10th | Iggy Afterschool 4:00-5:15pm |
| Oct. 17th | <b>FALL BREAK</b>            |
| Oct. 24th | <b>FALL BREAK</b>            |
| Oct. 29th | Gym Day 4:00-5:15pm          |
| Oct. 31st | Iggy Afterschool 4:00-5:15pm |

| November  | Events                       |
|-----------|------------------------------|
| Nov. 5th  | Gym Day 4:00-5:15pm          |
| Nov. 7th  | Iggy Afterschool 4:00-5:15pm |
| Nov. 12th | Gym Day 4:00-5:15pm          |
| Nov. 14th | Iggy Afterschool 4:00-5:15pm |
| Nov 19th  | Gym Day 4:00-5:15pm          |
| Nov 21st  | Iggy Afterschool 4:00-5:15pm |
| Nov. 26th | Gym Day 4:00-5:15pm          |
| Nov. 28th | <b>NO IGGY--THANKSGIVING</b> |

| December  | Events                                    |
|-----------|---|
| Dec. 3rd  | Gym Day 4:00-5:15pm                       |
| Dec. 5th  | Iggy Afterschool 4:00-5:15pm              |
| Dec. 10th | Gym Day 4:00-5:15pm                       |
| Dec. 12th | Iggy Afterschool 4:00-5:15pm              |
| Dec 17th  | Gym Day 4:00-5:15pm                       |
| Dec 19th  | Iggy Afterschool 4:00-5:15pm (Xmas Party) |
| Dec. 26th | <b>CHRISTMAS BREAK-NO IGGY</b>            |
| Jan 2nd   | <b>CHRISTMAS BREAK-NO IGGY</b>            |

**Children & Youth Ministries of Avon UMC Permission Slip and Medical Treatment**

I give permission for my child to accompany Echo Youth Group(includes Iggy) on 2019-2020 Echo Youth Trips & Events/Programs

My child may ride in the church van or bus yes /no

My child may ride in the youth pastor's or a chaperone's personal vehicle \_\_\_\_\_yes \_\_\_\_\_no

**Address:**

**Telephone #:**

**Emergency telephone #:**

**Medical Information (to be completed by Parent/Legal Guardian:**

Child's birth date:

Family Doctor:

Telephone :

Is your child allergic to foods or medicine? If yes, please explain

Your health insurance company?:

Insurance company claim's address:

Member's name: Identification #

Benefit Code: Account #

Expiration date:

Any other health issues/allergies AUMC should be aware of?

When was the date of your child's last tetanus shot?

**MEDICAL AND LIABILITY RELEASE (Please read carefully and print appropriate answers in blanks) This must be signed and dated by parent/legal guardian**

I, , the legal custodial parent or legal guardian of \_\_\_\_\_ who desires to voluntarily participate in the event planned with AUMC assumes all responsibility for any accidents or other mishaps, including, but not limited to, seriously bodily injury, permanent disability, and/or death with respect to my child, and I hereby waive my right and my child's right to any claim, cause of action and/or the right to file a law suit, and further release Avon United Methodist Church, its employees, agents and volunteers of each entity from any and all responsibility or liability of any nature whatsoever for any loss or damage to my child's property or person, including personal injury and/or death sustained during the above described trip.

This instrument shall be binding upon the relatives, personal representatives, heirs, beneficiaries, next of kin or assigns of the above-named child and shall inure to the benefit of the organization named as well as their directors, officers, sponsors, employees, agents, volunteers, successors and assigns.

I have carefully read this Medical and Liability Release and by my signature, I am stating that I understand and accept all of its provisions, and understand that I am giving away substantial legal rights for both myself and my child and have the appropriate authority to execute this release.

I also give permission to the Leader of AUMC and/or volunteer sponsor of the above trip to order X-rays, routine tests and treatment for my child if I cannot be reached in an emergency. I further give permission to hospitalize, secure treatment, and order injections, medicine or surgery for my child named above during the above trip. I hereby accept liability for all treatment set forth in this paragraph and release AUMC and its leaders/volunteers from any liability of payment.

**Parent/Guardian's signature:** \_\_\_\_\_

**Email address to receive Iggy updates:** \_\_\_\_\_

**Date:** \_\_\_\_\_



# IGGY 56 Bus Form

Avon United Methodist Church  
6850 E US Highway 36, Avon, IN 46123  
317-272-4068

I give my child \_\_\_\_\_  
permission to ride the Avon United Methodist Church Bus each  
Thursday (except for holidays) for their **IGGY 56** after school program  
during the school year.

Parent signature: \_\_\_\_\_

Date: \_\_\_\_\_ Emergency Contact #: \_\_\_\_\_



## CHURCH COPY IGGY 56 Bus Form

Avon United Methodist Church  
6850 E US Highway 36, Avon, IN 46123

I give my child \_\_\_\_\_  
permission to ride the Avon United Methodist Church Bus each  
Thursday (except for holidays) for their **IGGY 56** after school program  
during the school year.

Parent signature: \_\_\_\_\_

Date: \_\_\_\_\_ Emergency Contact #: \_\_\_\_\_

My student attends: \_\_\_\_\_ AIS West \_\_\_\_\_ AIS East