

January 2, 2024

Dear Parents:

WELCOME TO SUMMER LYNC SIGN-UP!!

I cannot believe that the holidays are behind us and we are moving towards spring and then SUMMER!!!! I am excited for that to happen as I always enjoy my summer with the kids. I am anticipating a summer filled with growth not only for the kids, but mostly for me. This summer will be adventurous as our playground equipment has been installed and we are beginning to build the fence surrounding it. I appreciate all of the donations over the past couple years to accomplish these improvements to our facilities!!!!

This years curriculum will be the Ten Comandments. Each week your children will be studying a new commandment. Regardless of the course of study, your children will be studying about life skills that can help them draw closer to Jesus and develop their own personal relationship with Him when they are filled with the Holy Spirit. Lessons in the Bible will demonstrate valuable life skills and how they can become more reliant on God in their own personal journey. I am extremely excited to see how God works in our lives this summer.

SUPER IMPORTANT DETAILS:

1. Your children are able to attend if they are age eligible for kindergarten through seventh grade in the fall of 2024.
2. The summer's program will begin on Tuesday, May 28, 2024 and run through Friday, August 9, 2024.
3. **THERE WILL BE NO SET REGISTRATION DATE.** Open registration will occur until all slots are filled or May 8, 2024.

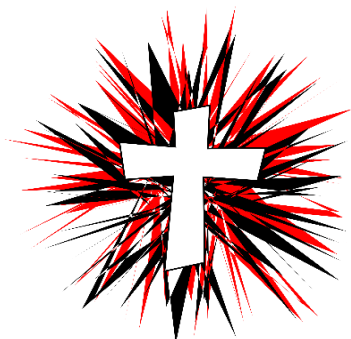
For your convenience, registration forms are included.

Attached to this letter is a fee schedule. Registration fees remain the same at \$50.00 / child. (If your child attends School LYNC, contact the director for your registration fee total.) EVERY participant will have a weekly fee. This weekly fee will ensure the sustainability of the program for the future.

While many things are uncertain in our daily lives, there is one thing that I am certain.....God is good all the time. Even when things happen not the way we would like, God is still good. He knows the entire picture whereas we only know the here and now. As you face uncertainty, struggles, and frustration with the way life is happening right now, please continue to rely on God for the answers that you need. I will continue to pray for you and your families throughout the rest of the winter season as well as spring and into summer!!!

See You SOON!!!!

Children are a heritage from the Lord....Psalms 127:3



Family Registration Form

Mother's Name: _____	Father's Name: _____
Mother's Address: _____	Father's Address: _____
City/State/Zip: _____	City/State/Zip: _____
Mother's Phone: _____	Father's Phone: _____
Mother's Employer: _____	Father's Employer: _____
Work Phone: _____	Work Phone: _____

Step- Mother's Name: _____	Step - Father's Name: _____
Step-Mother's Address: _____	Step-Father's Address: _____
City/State/Zip: _____	City/State/Zip: _____
Step-Mother's Phone: _____	Step-Father's Phone: _____
Step-Mother's Employer: _____	Step-Father's Employer: _____
Work Phone: _____	Work Phone: _____

In case of an emergency, whom should we contact first? _____

Please list at least one additional emergency contact person (other than yourself) and phone numbers:

For safety purposes, please list anyone who will be permitted to pick up your child from LYNC and the vehicle that they normally drive (include yourself if you will be providing transportation .)

Name	Relationship	Vehicle
_____	_____	_____
_____	_____	_____
_____	_____	_____

If it is necessary for someone other than those listed to pick up your child, you MUST provide a written note giving that person permission to pick up your child.

Liability / Medical Release

In consideration of being accepted by Jefferson Community Church for participation in LYNC, I / we being the parents / legal guardian of: _____, do release and agree to hold harmless Jefferson Community Church and the directors thereof from any and all liability, claims, or demands for personal injury, as well as damage and expenses, of any nature that may be incurred by the parent/legal guardian and child-participant while the child is participating in program.

I/We, on behalf of our child-participant, assume all risk of personal injury, damage, and expense as the result of participation in recreational activities involved. Authorization and permission are given to said church to furnish any necessary transportation, food, and lodging for our child-participant.

I/We, as parents/legal guardians of the child-participant give our permission for him/her to participate fully in all activities. We give our permission to take said participant to a doctor or hospital and authorize medical treatment, and we assume all costs for this medical treatment. We understand that we will be contacted if at all possible, but in the event that we cannot be reached, the director and/or staff may choose a reputable physician or emergency facility. Should it be necessary for the participant to return home due to medical reasons, disciplinary action, or otherwise, we assume all transportation costs.

I give permission for my child's picture (but no identifying information) to be use in publicity for LYNC, which may include, but is not limited to, publication on the church website and/or social media sites.

I further give permission for release of information regarding my child between Jefferson Community Church LYNC staff and my child's school _____ (name of school).

Child's Name _____

Signature of Parent/Legal Guardian _____

Date _____

LYNC

Letting Your Neighbor Care
Child's Information

Please complete a form for **each** child who will be attending LYNC this summer.

Child's Name: _____ Gender: _____ Male _____ Female Age: _____

Birthdate: _____ School: _____

Grade **Currently** Enrolled: _____ Township: _____

Does your child have any allergies or medical issues that we need to be aware of? _____ Yes _____ No
Please describe. _____

Is your child currently taking any prescribed medications ? _____ Yes _____ No
Please list medications and side effects that your child may experience. _____

Does your child qualify for free or reduced lunches? _____ Yes _____ No

Has your child been identified by the school as below proficiency in reading? _____ Yes _____ No

Does your child have an IEP/504 plan or is identified to be at risk by school personnel? _____ Yes _____ No

Are there current court orders related to the custody of your child or restrict a named person from having access to your child?

If yes, please provide documentation.

_____ Yes _____ No

Please list any additional information that you feel the LYNC staff would need to know about your child as well as the most important behavioral, social, and emotional areas you would like to see your child work on this summer:

T-Shirt Size (Included in registration fee)

_____ Youth Small (6-8)

_____ Youth Medium (10-12)

_____ Youth Large (14-16)

_____ Adult Small (same as Youth XL)

_____ Adult Medium

_____ Adult Large

_____ Adult XL

SWIMMING PERMISSION SLIP

My child, _____ has my permission to go swimming with LYNC throughout the summer on scheduled swim days. Swim days will be at the church parsonage house across the lawn from LYNC. I give permission for my child to walk with their LYNC group to the pool. I understand that there will be a lifeguard on duty, and LYNC staff and volunteers will be in attendance and provide supervision at all times. I understand that all children must pass a swim test before being allowed in the "deep" end. If an accident or injury should occur, I agree to hold harmless Jefferson Community Church and all LYNC staff and volunteers. No child is required to swim if he/she or the parents prefer. No child entering kindergarten will be permitted in the "deep" end.

Please circle your child's approximate swimming ability.

Non-Swimmer

Beginning Swimmer

Intermediate Swimmer

Advanced Swimmer

Parent/Guardian Signature

Date

Summer LYNC 2024

The following plans are available during Summer LYNC 2024. Every participant will be assessed a weekly fee based on the plan that they select. A payment schedule will be mailed to you. Changes in your weekly plan can be made via email until MAY 15, 2024. Absolutely NO changes will be made after that point.

Fee Schedules	First Child	Each additional Child
PLAN A - REGULAR LYNC Child attends Monday thru Friday from 9:00 a.m thru 3:00 p.m. This is a flat weekly rate. Your charges will NOT be prorated if your child does not attend.	\$30.00 / WEEK	\$ 20.00 / WEEK
PLAN B - MORNING HALF TIME Child arrives between 5:30 a.m. and 9:00 a.m. and is picked up by 3:00 p.m. Child attends Monday thru Friday. This is a flat weekly rate. Your charges will NOT be prorated if your child does not attend.	\$50.00 / WEEK	\$40.00 / WEEK
PLAN C - AFTERNOON HALF TIME Child arrives at 9:00 a.m. and is picked up by 5:30 p.m. Child attends Monday thru Friday. This is a flat weekly rate. Your charges will NOT be prorated if your child does not attend.	\$50.00 / WEEK	\$40.00 / WEEK
PLAN D - FULL TIME CARE Child may arrive beginning at 5:30 a.m. and depart no later than 5:30 p.m. Child attends Monday thru Friday. This is a flat weekly rate. Your charges will NOT be prorated if your child does not attend for the weeks you have signed up for.	\$70.00 / WEEK	\$60.00 / WEEK
PLAN E - DROP IN CARE Child drops in occasionally for either before OR after care Child drops in occasionally for BOTH before AND after care.	\$17.00 / session \$25.00 / day	\$15.00 / session \$23.00 / day

Please ONLY sign up for the weeks that you need for care. See attached registration forms to indicate the weeks your child will attend.

EACH CHILD HAS A \$50.00 REGISTRATION FEE!!!

This fee is non-refundable fee and is required in order to secure your child's spot.

If your child attends School LYNC, please contact the director for your registration fee total.

LYNC Registration Form

LYNC 2024 is from May 28, 2024 thru August 9, 2024.

Family Name:

My children will be attending LYNC as follows:

_____ **Plan A - Regular LYNC**

Arrive at 9:00 a.m. and depart at 3:00 p.m.

_____ **Plan B - Morning Half Time**

Arrival time beginning at 5:30 a.m. and depart at 3:00 p.m.

_____ **Plan C - Afternoon Half Time**

Arrive at 9:00 a.m. and depart no later than 5:30 p.m.

_____ **Plan D - Full Time Care**

Arrive beginning at 5:30 a.m. and depart no later than 5:30 p.m.

_____ **Plan E - Drop In Care**

Occasional care.

Please mark the following weeks that your child will be attending.

_____ May 28 - May 31
_____ June 3 - June 7
_____ June 10 - June 14
_____ June 17 - June 21
_____ June 24 - June 28

_____ July 1 - July 5 (We will be closed July 4th.)
_____ July 8 - July 12
_____ July 15 - July 19
_____ July 22 - July 26 (Fair Week)
_____ July 29 - August 2
_____ August 5 - August 9

You must register your child(ren) for one of the plans. You may not switch back and forth during the summer.

You may NOT pro-rate for partial weeks. This requirement is necessary in order to adequately plan for staffing needs.

Adjustments may be made to your weeks until MAY 15, 2024.

After that time you are expected to pay for ALL weeks for which you have registered for.

To make changes, please email: jbclync@hotmail.com.

I understand that I am responsible for paying weekly, in advance, for all weeks for which I have registered my children. I understand that weekly payments are due on Friday for the upcoming week. I have read and signed the liability/medical release for my children to attend LYNC and agree to those terms.

Signature of Parent/Guardian: _____

Date: _____