



Hello Parents!

We are so delighted to have your 5th grader in NH Kids and in Foundations and Transition! This is an awesome class of kids, and Pastor Weaver and I are really enjoying seeing them grow and mature this year. We wanted to highlight one of our main 5th grade events for you—our 5th grade retreat. This is an extremely important event and we would love to have your child attend. We have included an info sheet with our schedule and details, along with a permission form that you must return by January 13th to register your child. If you have any questions please feel free to contact me or Pastor Weaver anytime!

Blessings!

Pastor Cortney Ostrander
Elementary Children's Pastor

New Hope Assembly of God
6800 Townsend Avenue
Urbandale, IA 50322
(515)254-9094



5TH GRADE RETREAT

Sunday, Jan. 20 @ 10:30 AM - Monday, Jan. 21 @ 1:00 PM

RETREAT SCHEDULE

SUNDAY

10:30 AM: Worship Service
12:30 PM: Eat Lunch @ Church
1:30 PM: Swimming @ Ramada
4:00 PM: Get ready for Service
5:00 PM: Dodgeball @ Church
5:30 PM: Dinner @ Church
6:00 PM: Service with Pastor Phill
8:00 PM: Swimming
10:30 PM: Lights Out

MONDAY

8:30 AM: Breakfast @ Church
9:00 AM: Service with Pastor Phill
10:00 AM: Final Swim @ Ramada
11:30 AM: Check-out
12:00 PM: Lunch @ Chick-Fil-A
1:00 PM: Pick up @ Church

We'll be staying at:
RAMADA TROPICS RESORT
5000 Merle Hay Road
Phone: 515.278.0271
ramadatropicsresort.com

COST IS \$50.00

We Provide:
Lunch and Dinner on
Sunday & Breakfast and
Lunch on Monday



We have invited **PHIL JOHNSON**,
Lead Youth Pastor at Emmanuel
Christian Center in Spring Lake Park,
MN to be our GUEST SPEAKER!
HE'S AWESOME!!!!

Please pack a Bible, modest bathing suit, and anything you would normally need for a sleepover. Please pay & register by January 13th. Questions? Contact Pastor Weaver (515-778-4524) OR Pastor Courtney (515-564-9827).

WE CAN'T WAIT TO SEE YOU THERE!

Permission/Medical Release Form

New Hope Assembly of God Kids Ministries
6800 Townsend Ave. Urbandale, Iowa 50322

Permission

Date _____

I, _____, the parent/guardian of
_____, do hereby grant permission for the above to attend all
activities of the year with the New Hope Assembly of God Student Ministries under the supervision of the appointed
leaders. I also grant permission to be transported by Kids Pastor/Leader to and from events in necessary vehicle.
I realize that if my child refuses to adhere to the rules, I will be called to bring them home immediately.

Does your child know
how to swim
proficiently?

Yes

No

Signed: _____

Address: _____

Phone: _____

Emergency Phone: _____

Medical Release

I/We, _____, being the parents/legal guardians of
_____, do further give my/our consent
for the properly appointed leader or staff member of the New Hope Assembly of God, Urbandale to secure the
administration of medical treatment or medication for the above named child, and I/We do further agree to the
performance of such treatment, anesthetics, and operations as the opinion of the attending physician is deemed
necessary for our child.

Date _____ Signed _____

Insurance Company _____ Policy Number _____

My child can receive: Tylenol, Ibuprofen, or Antacids as deemed necessary Yes No

**BELOW, LIST ANY MEDICATIONS OR TREATMENT THAT SHOULD NOT BE GIVEN TO
YOUR CHILD BECAUSE OF DANGEROUS REACTIONS.**

