## ÉCOLE MOTHER TERESA CATHOLIC SCHOOL



79 Old Boomer RoadSylvan Lake, AB T4S 1Z4

Phone (403) 887 – 6371 Fax (403) 887 – 6373

Dear Parents;

September 09 2019

Your son or daughter is interested in attending our Church based program for youth in grades 6-8 which takes place most Tuesdays from 7pm-9pm at Our Lady of the Assumption Parish, 5033 47a Ave, Sylvan Lake. Each night we will address a different faith topic or an issue, in a way that is fun, dynamic, and relevant. Typically we will begin each night with a large scale game, followed by snack, a teaching, prayer time, and a Saint of the Week skit.

Our Fall Season runs every Tuesday from October 1, 2019-December 10, 2019

If your child would like to attend any of the youth nights, please fill in and sign the attached Consent Form, and return it to me at the school or the church. Your child does not need to commit to every week, they are free to come when they are able to. Consent forms are good for the entire year, so once students are registered they will not need another form in the winter or spring season. If you have any questions or concerns, please contact me at 403-848-0955 or peter.vankampen@rdcrs.ca. Like us on Facebook at **OLO Assumption Youth** for updates!

Parent volunteers are always needed! Come check out a night to see how you can help!

In Christ,

Peter van Kampen Youth Ministry Coordinator- École Mother Teresa School

## Parent Field Trip Consent Form École Mother Teresa School Youth Ministry Program 2019- 2020

**Dear Parent** Sept. 09, 2019

Your prior consent must be given in order that your son/daughter can participate in the field trip, as outlined on the attached information form.

Your Signature Will

- Authorize your son/daughter's participation in the field trip.
- Indicate that you have been fully informed about the field trip and do not require any further information.
- Accept responsibility for payment of any costs involved in the trip.

Please return form to École Mother Teresa School or to Our Lady of the Assumption Parish during youth

programs.	
To: Peter van Kampen	
Re:	Grade
(Name of Student)	
	hter in the proposed field trip to Our Lady of the Assumption of the Assumption the 2019-2020 school year.
Required Medications:	
Medical Alert (please be aware of the following)	
Parent Name :	
Home Phone:	_ Cell Phone
Information about the purpose of the trip, the sup been provided to me.	pervision, transportation, costs, and other arrangements has
Signature of Parent	