

Jan. 4, 2012

Dear Parents:

The CARAVAN/CLUB 56 annual over-night Lock-In is just around the corner! All kids grades 1st through 6th are welcome! The dates are **Friday, February 3rd and Saturday, February 4th**. The **cost is \$15.00 per child or \$35.00 maximum per family** (this pertains to families with 3 or more children). The Lock-in will take place at Detroit First Church of the Nazarene. We have reserved the entire church for the safety of the children.

Please have your child **at church by 6:00 p.m. All doors will be locked and check-in will be closed at 6:30 p.m.!** Please be prompt! Dinner will be served immediately Friday evening.

Our Lock-In festivities will finish on **Saturday at 10:00 a.m.** Again, for the sake of our wonderful adult Caravan Guides and Club 56 workers, **PLEASE BE PROMPT ALSO WHEN PICKING THEM UP!**



Our theme for this year's Lock-In is:

**"GOD'S SECRET SERVICE....
Serving Others, Saving Lives!"**

**SPECIAL SPEAKER: Pastor Levi Lunsford
Special Music: Guest Drummers**

Pastor Levi serves as Pastor to youth and Families here at Detroit First Church. Levi is a graduate of Trevecca Nazarene University and Nazarene Theological Seminary and is a dynamic and creative speaker. We look forward to spending time with your child/children and hope they will be able to come for a fun and spiritual weekend. We have many exciting activities planned for them including taking them to Lifetime Fitness for rock climbing and swimming.

Enclosed is a list of items to bring, a permission slip for Lifetime Fitness and a permission slip for Caravan/Club 56 along with a medicine release form. **The money along with the permission slips MUST be completely filled out, signed and returned to us no later than Wednesday, January 25th.** If your child is on medication, on the day of the lock-in, bring in the signed medicine release form along with the medicine in its **ORIGINAL CONTAINER.** Please double check that all forms are signed and completely filled out. Thank you for your consideration.

On Sundays, we will be at the table located outside the fellowship hall to collect the money and reserve a spot for your child for this event. And on Wednesdays, we will be at the table on the lower level by the elevator to collect registration paperwork. You may pay either by cash or check made out to Detroit First Church of the Nazarene.

If you have any questions, feel free to call Tina Moore or Judy Brown or e-mail Tina tfreckles@aol.com with the following subject line: attention: Caravan/Club 56 Lock In. We look forward to having your child/children join us for this exciting, not-to-be-missed event!

Yours in Christ,

Tina Moore
Caravan Director
248-374-1287 (home) 248-505-8856 (cell)

Karin Snell
Club 56 Director
248-348-7600

Judy Brown
Children's Pastor
248-348-7600

LOCK –IN Supplies to bring:

******Bathing suit** for Lifetime Fitness (modest suit please)

Sleeping bag or warm bed roll (you may also bring a cot or blow up mattress)

That special friend for bed time

P.J's.

Underwear (three pair)

Warm socks(three pair)

Gym shoes for running around the fellowship hall and gym at Lifetime Fitness

Comfortable clothing for Saturday

Personal Hygiene Kit

Toothpaste/toothbrush

Brush or comb

Deodorant

Flashlight

One plastic bag (for wet bathing suit)

Your favorite snack food to share

And. . . a big smile!

NOT ALLOWED!!

TV's

CD/I PODS

Hair dryers

Homework

Bad Attitudes 😊

CAN'T WAIT TO SEE YOU!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!

MEDICAL RELEASE FORM

I give Tina Moore R.N. permission to give my child, _____
(child's name)

RX Medication _____ as ordered by our physician
(name of medication(s) and dosage)

during the Caravan/Club 56 Over Night Lock-In Feb. 3rd – Feb. 4th, 2012 at Detroit First Church
of the Nazarene.

All medications need to be left in their ORIGINAL CONTAINERS.

Parent Signature

Date

PERMISSION SLIP

My daughter/son, _____ has my permission to attend the CARAVAN/CLUB 56 LOCK –IN at Detroit First Church of the Nazarene on Feb. 3rd – 4th and attend all the activities as planned. I understand and also give my permission for my child to be transported by private cars/vans (driven by Caravan Guides/Club 56 workers) to the off campus activities.

My daughter/son is in good physical condition at present and has had no serious illness or operations since her last health examination.

Any Known allergies:

In case of emergency, I can be reached at:

Address: _____ Phone: _____

Please list names and phone numbers of two other responsible adults to call if we can't reach you in case of an emergency.

1. _____

2. _____

The Detroit First Church of the Nazarene has my permission to secure emergency medical care for my daughter/son while participating in this activity.

My insurance carrier: _____

Policy # _____

Signed (Parent or Guardian): _____ Date: _____

Child's present Grade level: _____ Child's present age: _____

I was invited by a friend that attends Caravan or Club 56: Yes _____ No _____

Please provide friend's name: _____

Assumption of Risk

I, the undersigned, in return for the consideration of using the facilities, equipment and/or participating in activities sponsored by LIFE TIME FITNESS, Inc., acknowledge that using the facilities, equipment and/or participating in activities sponsored by LIFE TIME FITNESS, Inc. entails inherent risks which could result in significant harm to myself or to others, including physical injury, paralysis or death. Those risks include, but are not limited to, the following:

1. Injuries resulting from the negligence of the owners, operators, employees, or volunteer assistants of LIFE TIME FITNESS, Inc.; or the negligence of guests, visitors or persons who may be present at LIFE TIME FITNESS, Inc.; or the negligence of any designers, manufacturers or installers of the facilities or equipment of LIFE TIME FITNESS, Inc.; or the negligence of the landlord of LIFE TIME FITNESS, Inc.;
2. Injuries or death resulting from the failure or negligent misuse, by me or by others, of the facilities or equipment of LIFE TIME FITNESS, Inc.;
3. Injuries resulting from slips, trips, falls or other such accidents that occur while using the facilities or equipment of LIFE TIME FITNESS, Inc., or which may be caused by other persons' use of the facilities or equipment of LIFE TIME FITNESS, Inc.;
4. Injuries resulting from participating in and/or using equipment in connection with activities sponsored by LIFE TIME FITNESS, Inc. which may take place outside of any premises owned or operated by LIFE TIME FITNESS, Inc.; and
5. Injuries that occur from the negligence or lack of adequate training of those volunteers, agents or employees of LIFE TIME FITNESS, Inc. who seek to assist with medical or other help either before or after injuries have occurred.

I agree to release from all liability, discharge and promise not to take legal action against (i) LIFE TIME FITNESS, Inc.; (ii) any other guest, visitor or person present or using the facilities or equipment of LIFE TIME FITNESS, Inc.; (iii) any designers, manufacturers or installers of the facilities or equipment of LIFE TIME FITNESS, Inc.; and/or (iv) the landlord of LIFE TIME FITNESS, Inc. for any and all harm or damage to me in connection with my use of any LIFE TIME FITNESS, Inc. facilities or equipment or in connection with any activities sponsored by LIFE TIME FITNESS, Inc. whether or not such activities take place outside of any premises owned or operated by LIFE TIME FITNESS, Inc. This Agreement releases the aforementioned persons from any liability to me, my heirs, next of kin, assigns or personal representatives for any losses or damages or claims or demand arising out of my personal injuries, damage to property or my death, even if their individual or collective negligence contributes to such personal injury, damage or death.

I freely and voluntarily assume complete personal responsibility for these risks and for the injuries that may occur to as a result of these risks, even if such injuries occur in a manner that is not foreseeable at the time I sign this Agreement. I realize that by voluntarily assuming the risks involved, I will be solely responsible for any loss or damage that I sustain. I have read this agreement thoroughly and understand the terms. My participation in this activity and my execution of this Agreement are both purely voluntary and I elect to do so in spite of the risks.

Signature

Date

Print Name

CLIMBING WAIVER



_____	_____	_____	_____	_____
Climber's Last Name	Climbers First Name	Climber's Phone Number	Climber's Age	Climber's DOB
_____	_____	_____	_____	_____
Climber's Last Name	Climbers First Name	Climber's Phone Number	Climber's Age	Climber's DOB
_____	_____	_____	_____	_____
Address	City	State	Zip Code	
_____	_____	_____	_____	
Emergency Contact	Phone Number			
_____	_____			

Climbing Wall Rules and Regulations

- All climbers must be five years old or older.
- All climbers must complete a Waiver and Release at least once per year and initial the Climbing Wall Card prior to each climb.
- Climbers under the age of 18 must have the Waiver and Release form signed by a parent or legal guardian.
- All climbers must demonstrate and pass a belay checkout and must agree to utilize proper discrete hand switch belaying technique.
- All climbers agree to use the double-check exchange before beginning each climb. The belayer will check the climber's gear, and the climber will check the belayer's system and exchange confirmation that the equipment is okay. This is most important and must vigilantly be performed at the start of each and every climb.
- All climbers will comply with the judgments of the Life Time Fitness staff on duty.
- Approved climbing equipment only is allowed in the climbing cavern.
- Climbers must show Life Time Fitness staff their proof of payment when entering the climbing area.
- A minimum of one spotter per climber is required when bouldering. Boulderer's feet shall not exceed the height of the spotter's shoulders.
- No hard-soled or lug shoes will be permitted on climbing surfaces. Rock climbing shoes or athletic shoes are recommended.
- No bare-foot climbing.
- The belayer must pay attention to the climber by keeping the climber in eye contact at all times.
- No one will be allowed to climb or boulder unless an approved staff instructor or supervisor is present.
- No powdered or block chalk allowed. Chalk balls only.
- Lessons in progress have priority on routes. If an instructor needs the route you are on, you may be asked to move to another route. Please finish the climb and allow the lesson to use the route.
- Upon completion of the Basic Climbing/Checkout course climbers will be given a checkout card. The checkout card must be presented prior to using the wall.
- If using an auto belayer, climbers must pass an auto belay checkout.
- Any infractions of the above rules will result in loss of privileges. Repeated infractions may result in loss of club membership.

WAIVER AND RELEASE

I, the undersigned, understand that in consideration of using the facilities, climbing walls, equipment and/or participating in activities sponsored by Life Time Fitness, Inc. ("LTF"), I must obey all of LTF's indoor climbing wall rules and regulations as well as read and agree to the following Waiver and Release. I also acknowledge that indoor rock climbing entails inherent risks such as death, injury and damage to property. Those risks include, but are not limited to, death, injuries and damages resulting from the following:

1. The negligence of LTF, its owners, employees, representatives, volunteers or agents;
2. The negligence of guests, visitors or persons who may be present at or using the indoor rock climbing wall;
3. The negligence of the designers, manufacturers or installers of the indoor rock climbing wall or its related equipment;
4. The negligence, inattention or inexperience of belayers;
5. Falls, slips, collisions or other such accidents that occur while using the indoor rock climbing wall, whether caused by me or others;
6. The misuse or failure of the indoor rock climbing wall or its associated equipment; and
7. The negligence or lack of adequate training of LTF's employees, representatives, volunteers, or agents who seek to assist with medical or other help either before or after injuries have occurred.

I agree to release from all liability, discharge and promise not to take legal action against LTF, its directors, owners, employees, representatives, volunteers or agents, and its landlord. I agree to release the aforementioned persons from any liability to me, my heirs, next of kin, assigns or personal representatives for any losses, damages, claims or demand arising out of my death, injuries or damages to property, even if their individual or collective negligence contributes to such death, injuries or damages.

I certify to LTF that I am eighteen (18) years of age or older, physically and mentally capable of safely participating in indoor rock climbing and that any personal belayer and equipment that I use as part of my climb are appropriate and properly qualified for my climb. I freely and voluntarily assume complete personal responsibility for all risks and for my death or any injury or damage that may occur to me or my property as a result of these risks, even if such death, injury or damage occurs in a manner that is not foreseeable to me at this time. I realize that by voluntarily assuming the risks involved, I will be solely responsible for my death or any injury or damage that I sustain.

I have read this Waiver and Release thoroughly and understand the terms. My use of the indoor rock climbing wall and my execution of this Waiver and Release are both purely voluntary and I elect to do so in spite of the risks.

_____	_____	_____
Signature of Climber	Print Name of Climber	Date
_____	_____	_____
Signature of Climber	Print Name of Climber	Date

IF PERSON IS UNDER 18 YEARS OF AGE, A PARENT OR LEGAL GUARDIAN MUST COMPLETE THE FOLLOWING:

I, the undersigned parent or legal guardian of _____ ("Minor"), hereby execute the foregoing Waiver and Release for and on behalf of Minor and agree to bind myself, Minor and any heirs, next of kin, assigns or personal representatives to the terms of this Waiver and Release. I represent that I have full legal authority to act for and on behalf of Minor, and I agree to indemnify and hold harmless LTF for any expenses, claims or liabilities that may arise as a result of any insufficiency of my full legal authority to execute the foregoing Waiver and Release.

_____	_____	_____
Signature of Parent or Legal Guardian	Print Name of Parent or Legal Guardian	Date

IF YOU ARE PROVIDING YOUR OWN BELAYER, THE BELAYER MUST ALSO COMPLETE THE FOLLOWING:

I, the undersigned belayer, certify to LTF that I am properly qualified and experienced to ensure a climber's safe use of an indoor rock climbing wall. I agree to indemnify and hold harmless LTF for any expenses, claims or liabilities that may arise as a result of my actions or insufficient qualification or experience as a belayer.

_____	_____	_____
Signature of Parent or Legal Guardian	Print Name of Parent or Legal Guardian	Date