



NEWLONSBURG YOUTH

YOUTH GROUP
HANDBOOK & Registration
2025 - 2026

Youth Group Dates To Remember

6 - 8 pm @ NPC

Semester 1:

Wednesday Sept 17
Wednesday Oct 1
Wednesday Oct 15
Wednesday Nov 5
Wednesday Nov 19
Wednesday Dec 3
Wednesday Dec 17

Semester 2:

Wednesday Jan 14
Wednesday Feb 4
Wednesday Feb 18 - Ash Wed. 2026, end @ 7:15PM for Service.
Wednesday March 4
Wednesday March 18
Wednesday April 1
Wednesday April 15
Wednesday May 6 - Last Hoorah

Newlonsburg Youth Group
PERMISSION SLIP, STUDENT INFORMATION AND PARENTAL CONSENT FOR EMERGENCY 2025-2026



(Youth's Full Name) _____ Has my (our) permission to participate in Newlonsburg Presbyterian Church Youth Group, supervised by adults.

This youth has, or is subject to the following conditions (please include any allergy or reaction to medication):

_____ Date of last tetanus shot (good for 10 years)

Allergies _____

MEDICAL INSURANCE INFORMATION:

Name of Company _____

Policy _____

Holder _____

Group Number _____ Contract Number _____

Policyholder's place of Employment _____

Family Doctor's Name _____

Phone _____

Doctor's Address _____

I (We) understand the program hours are **the 1st & 3rd Wednesday of the month from 6 -8 pm for students in grades 6th - 12th.**

I (We) do hereby, for a good and valuable consideration, release and agree to indemnify and hold harmless Newlonsburg Presbyterian Church and its officers and the adult supervisors and leaders of the Youth Group program, from and against any and all actions, claims, demands, suits or other liabilities which may result from the above named minor's participation in the youth program.

I (We) also give Newlonsburg Presbyterian Church (NPC) permission to have, use, publish, reproduce, and release names, photographs, slides and/or video tapes/DVDs of said youth participating in YOUTH GROUP activities for public relations purposes in print, broadcast media, social media, facebook, instagram and on the NPC and/or Redstone Presbytery website, unless we have checked this box ☐.

I(We) _____ am (are) the lawful parent(s) or guardian(s) of the above-named minor child of whom I(we) have custody and control. In the event of a medical emergency, if I(we) cannot be contacted, I(we) hereby authorize the adult supervisors and leaders of the

YOUTH program to procure such emergency medical treatment as they may determine to be reasonably necessary, and from providers they may select, to provide for the health and well-being of such child while in their custody or control. In such event, I(we) further authorize such supervisors and leaders of the YOUTH program to sign any and all consents that may be required by treating physicians or hospitals in connection with such emergency medical treatment, and, without limiting the generality of the foregoing, further authorize the administration of anesthesia, the drawing of blood, the administering of injections, surgery and the performance of such additional procedures as may be considered necessary or desirable in the judgment of such physician or hospital.

I (We) assume full financial responsibility for such care, including prescribed medications and transportation by ambulance and agree to make full payment for the same upon receipt of statement of fees.

Parent/Youth Contact Information

Youth's Name: _____

Youth's Address: _____

Youth's Birthday: _____

Youth's Grade: _____

Parent/Guardian Name(s): _____

Parent/Guardian Email: _____

If you cannot be reached, who should we contact in case of an emergency?

Name: _____ Relationship: _____ Phone: _____

Parent/Guardian Phone Number(s): _____

TEXT MESSAGES OK? YES NO

Student's Phone Number: _____

Youth Programming Text Messages OK? YES NO

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Student Signature _____ Date _____



Dear Parents,

I'm so excited to be kicking off another year of Youth Group. There will be a few changes this year that I want to bring to your attention. Newlonsburg Youth Group will be meeting on the 1st and 3rd Wednesday of the month from 6 - 8 pm this year. This year dinner will be included along with snacks at every youth class. In order to help offset the cost of the cost of food, drinks and programming we are implementing a change of charging \$5 each time your child comes to youth Group for this program. You can submit your payments by scanning the QR Code here, or you can scan it when you drop off your children.



If you wish to bring a friend in 6th - 12th grade - they can come for free the first time. After that they must be a registered youth student.

PARENTS WE NEED YOU!

Thanks for all you do to invest in the life of your teenager(s) already! I know it can be overwhelming to add one extra thing on the never ending to do list, so we're going to keep it simple! **We're asking that parents volunteer for a minimum of one youth group per semester.** You can sign up by going to the link below and clicking "Sign Up" next to the date you wish to help volunteer.

<https://www.signupgenius.com/go/10C084EAEAE2CA1FCC07-50691990-newlonsburg#/>

We enjoy having our youth here throughout the week and want to thank you for your time, efforts and commitment. I am grateful that your youth is a part of this ministry and choosing to make a commitment to the program.

Please reach out if you have any questions or if you need financial assistance scholarships are available.

Peace,

Joshua Kenst - Youth Director

npcyouthmindirector@gmail.com

 *Newlonsburg Presbyterian Church*
WORSHIP • SERVE • GROW