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## What is the Fall Pause?

This fall we will be taking a Saturday and pausing from all the things life is throwing at us. Instead of a more traditional Disciple Now, we will be intently taking time to look at how Jesus paused to spend time with His Father, but also comes to His disciples when they are in need. Encounter Music will be leading us in worship and Darren Webb, the Lead Pastor at Windsor Baptist Church will be teaching from God’s Word. We will spend the morning of November 7th at Union Station. They have the Aquarium, the Wheel, a ropes course, mini golf, a mirror maze, and a carousel. Due to covid-19, we will be required to wear a mask during the few hours we are at Union Station.

**When is the Fall Pause?** November 7, 2020

## How much is the Fall Pause?

## Registration starts on September 13, 2020 and ends on November 4th, 2020. We ask that when you register you pay the registration fee. The early bird registration runs from September 13-27 at $20 per student. Regular registration runs from September 28th-October 28th at $30 per student. The late fee runs October 29th-November 4th at $40 per student. Please make all checks payable to First Baptist Church. If you have any questions regarding payment you can email Caleb Heitmann at [caleb@fbcfcc.org](mailto:caleb@fbcfcc.org). Please Turn in payment directly to Caleb or the church office. If you give through the offering, please clearly label your payment and let us know that you placed it in the offering. This will allow us to locate it quickly and place it in the correct budget account.

## How do I register for Fall Pause?

1. You can register by filling out the paper forms and turning them into Caleb or the church office with payment.
2. You can register & pay online at [www.fbcfcc.org](http://www.fbcfcc.org) or our student ministry Facebook page. We will need the forms in the packet that is downloadable on the church website.

## Medical & Surgical Waiver

You must have a Medical & Surgical Waiver on file to attend the Fall Pause. It MUST be notarized, and it MUST have a parent signature. If you are over the age of 18 you do not need a parent signature, but it still must be notarized. They can also be downloaded from the website, www.fbcfcc.org.

## Fall Pause rules

Please read over the Fall Pause Rules and turn in with a parent & teen signature. This will serve as a means of accountability for the weekend.

**Questions or Concerns?** Contact Caleb Heitmann at [Caleb@fbcfcc.org](mailto:Caleb@fbcfcc.org) or 636-937-3668

Tentative Fall Pause 2020 SCHEDULE

**SATURDAY, November 7**

8:30am Check in at Family Life Center

9:00am Leave for Union Station

10:00am Arrive at Union Station

12:00pm Leave for the FLC

1:00pm Lunch

2:00pm Worship session 1

3:15pm Small group session 1

4:00pm Picture scavenger hunt

5:45pm Arrive back at the FLC

6:15pm Dinner

7:00pm Worship session 2

8:15pm Small group session 2

9:00pm Bonfire & smores

9:30pm Student Pick up!

**WHAT TO BRING TO Fall Pause**

* Complete registration packet including 2020-2021 Medical Release – Signed and notarized – You MUST have one on file to attend.
* Bible & pen
* Jacket, sweatshirt or fleece
* Tennis shoes
* Extra spending money for snacks at Union Station.

**DO NOT BRING**

* Alcohol, tobacco (includes e-cigarettes), firearms, vaping pens, fireworks or knives
* Supplies to play pranks
* A bad attitude
* Video game systems
* Phones are permitted for emergencies but must be kept out of site and not used during Fall Pause
* Music Players (iPods, MP3’s, etc…)

**First Baptist Church of Festus Crystal City**

**636-937-3668 or 636-931-4667**

**Activity Participation Agreement**

Name of sponsoring organization: First Baptist Church – Festus/Crystal City

Name of sponsor coordinator: FBC Student Ministry Telephone:

Description of activity: Fall Pause

Dates(s) and location of activity: November 7, 2020 @ FLC

*Please detach and keep upper section for your information and return the lower section.*

**Participant Information**

*(To be completed by authorized guardian; one per child)*

Name of participant:

Address: Telephone:

Name of emergency contact:

Is sponsor authorized to approve medical treatment? Yes \_\_\_\_\_\_ No \_\_\_\_\_\_

Early bird registration runs from September 13-27 at $20 per student. Regular registration runs from September 28th-October 28th at $30 per student. The late fee runs October 29th-November 4th at $40 per student.

Circle Registration: Early Bird Regular Registration Late Registration

**Participation Agreement**

By signing below, the participant (or parent/guardian if participant is a minor) acknowledges and accepts the ricks of physical injury associated with participation in the activity described above. Except for gross negligence on the part of the sponsor, the participant (or parent/guardian) accepts personal financial responsibility for any bodily or personal injury sustained during the activity. Further, the participant (or parent/guardian) promises to hold harmless the sponsoring organization and its representatives for any injury related to the activity.

If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.

Signature: Date:

**Fall Pause Rules**

Fallis a special, spiritual time for youth to draw closer to God and some things are just not appropriate for the purpose of the event. For that reason, this covenant is a necessary pledge to the Student Ministry your youth will refrain from any of the behaviors listed below:

* Pranks and practical jokes detract from the purpose of the weekend and will not be tolerated. In addition, wrestling and roughhousing are prohibited because someone always gets hurt or gets mad.
* No hazing, bullying, or harassing of others will be tolerated. Everyone deserves a loving, kind environment at Fall Pause.
* Fireworks, firearms, knives, vaping pens, any form of tobacco, alcohol, drugs, game systems, iPod/iPad, MP3 players and radios have no place at Fall Pause and need to be left at home.
* Phones are not to be used during Fall Pause unless there is an emergency.
* Be aware that you are responsible for any damages that you may cause at a host home or anywhere else you attend while at Fall Pause.
* You may not leave the Fall Pause at any time for any reason without a parent personally signing you out and picking you up.
* At no time do guys or girls need to be in each other’s areas, or spending time alone together. Personal displays of affection are offensive to the spirit of the Fall Pause and will not be allowed; this includes kissing, holding hands, touching, etc.
* You are expected to attend and participate in all scheduled services and activities. If you are too sick to participate in Fall Pause services and activities, you are too sick to remain at Fall Pause.
* ALL CLOTHING SHOULD REFLECT MODESTY AND DISCRETION. Extremely short shorts/skirts/dresses, sheer clothing, and shirts with inappropriate messages are not permitted at the Fall Pause.

***Your signature indicates that you and your parents know that if you fail to use good judgment and common sense in following the rules listed above, you will be dismissed from the Fall Pause and returned home with no reimbursement of your money.***

***I covenant with my Student Ministry Family to follow these rules. I understand and agree to abide by them.***

Student Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2020-2021 Medical and Surgical Waiver

*First Baptist Church of Festus & Crystal City 107 N. Truman Blvd. Crystal City, MO 63019*

# INSTRUCTIONS:

The 2020-21 Medical and Surgical Waiver will apply to all student events, trips and projects from September 1, 2020 through August 31, 2021. In the event that a participant needs medical attention, this waiver will provide an adequate and current record of the student’s medical information, and parental permission for First Baptist Festus/Crystal City as well as the hospital. Please be thorough with each answer. It is the responsibility of the parent or guardian to keep this information current. After completing the form, have it notarized in the space provided, as this is a requirement at many hospitals.

# PERSONAL INFORMATION:

Participant’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents’/Legal Guardian’s Name(s)

Address: City: Zip: Phone: Home- Business- Cell-

# MEDICAL INFORMATION:

Family Physician: Phone Number:

List below (or write “none”) any physical defects or conditions that the participant has such as: allergies, asthma, nervousness, headaches, dysmenorrheal, etc.

Should the participant at any time require medical attention, list any special information (or write “none”) which the physician might require such as: allergic to penicillin, rare blood type, etc.

Are the student’s immunizations current?  Yes  No Date of last Tetanus: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# MEDICAL INSURANCE:

Company Name: Policy Number: Phone Number:

 Check here if participant has NO medical insurance.

# WAIVER:

 TO BE FILLED OUT BY PARENTS OR LEGAL GUARDIANS OF PARTICIPANTS UNDER 18 YEARS OF AGE

I, the parent and/or legal guardian of , a minor, hereby acknowledge that said minor is presently under my care, custody and control. I hereby give said minor permission to participate in any and all activities at First Baptist Church of Festus/Crystal City, Missouri for which he/she, with my approval, registers to participate. I further expressly grant permission for said minor to participate in all activities while an active participant on trips and church events. If in the event there arises an emergency necessitating medical or surgical attention, I hereby consent and give my permission to the First Baptist Church of Festus/Crystal City staff, its representatives, the sponsors, or any attending physicians to make such decisions and to perform such medical treatments and/or surgery upon said minor which may, in their sole discretion, be necessary and proper under the circumstances. I, the undersigned parent and/or legal guardian of said minor, do hereby release, acquit, discharge and covenant to indemnify and hold harmless First Baptist Church of Festus/Crystal City its staff and/or representatives, the sponsors, and/or any attending physician from any and all claims, damages, actions, and causes of action of any nature, including but not limited to negligence, damages, and liabilities, arising out of the treatment of any sickness and/or accident and any related risks and dangers thereto, from financial responsibility for all medical treatment provided during the attendance of any student ministry events. I also assume responsibility for providing and paying for return transportation of said minor from the event location should it be necessary for disciplinary reasons.

Parents’/Legal Guardian’s Signatures:

Date:

Date:

TO BE FILLED OUT BY PARTICIPANTS WHO ARE CURRENTLY 18 YEARS OF AGE OR OLDER, AND ALL SPONSORS

I am 18 years of age or older and have read the above Medical and Surgical Waiver for minors and agree to the same terms. I hereby release, acquit, discharge and covenant to indemnify and hold harmless First Baptist Church of Festus/Crystal City and/or its staff, representatives and/or sponsors, or any attending physician, from any and all actions and causes of actions, related risks and dangers, including negligence, damages, liabilities arising out of the treatment of any sickness or accident, and financial responsibility for all medical treatment provided during the attendance of any student ministry events. I also assume responsibility for providing and paying for return transportation from the event location should it be necessary for disciplinary reasons.

Adult Participant’s Signature:

Date:

# NOTARIZATION:

Sworn and subscribed before me, a NOTARY PUBLIC, on this, the day of,

, 20\_\_\_

, Notary Public

My commission expires:

