

Consent Agreement

The undersigned does hereby give permission for our (my) child _____ to attend and participate in MCAC Jumping F.R.O.G. Club meetings.

We (I) authorize an adult, in whose care the minor has been entrusted, to consent of any emergency X-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licenses hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

The undersigned shall be liable and agrees to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization. Should it be necessary for our (my) child to return home due to medical reason or otherwise, the undersigned shall assume all transportation costs.

My child agrees to follow the MCAC policy and guidelines. The undersigned agrees to reimburse MCAC for any property damage caused by my child.

Signature (parent / guardian) _____ Date _____

- How do you know of this program? _____
- Have your child attended MCAC Jumping F.R.O.G club before: Y N
- The person introduce you : _____
- I want my non-Christian friend to be with me in the same group. My friend's name is: _____.

Notes:

- Registration by mail or in person only.
- Full payment must be provided at the time of submitting the registration form.
- Payment by cash or cheque; and payable to "Mississauga Chinese Alliance Church" or "MCAC". \$35 fee will charged for NSF cheque.
- Financial subsidies available upon request (contact Pastor Faith for details)
- Request to be in specific group or switch group is not guarantee and is subject to the committee final decision.
- Written notification is required for early pickup.

Refund Policies:

On or before Sept 27, 2008 Payment refund with a deduction of \$10 administration fee

After Sept 27, 2008No refund

Register from Sept to Dec 2008.....Regular fee

Register from Jan 2009Half of the regular fee



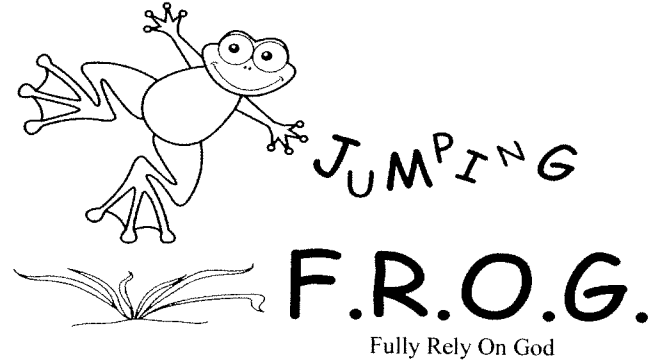
MISSISSAUGA CHINESE ALLIANCE CHURCH

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Tel: (905) 712-9202 Fax: (905) 712-3806

E-Mail: office@mcacon.org

Website: www.mcacon.org



MCAC Jumping F.R.O.G. Children Club

Sept 2008 to May 2009

Meeting on the **second and fourth** Saturday night 7-9pm

Club Kick-off Date: September 27, 2008

Registration Information:

Early Bird Registration Fee: (By August 10, 2008)

\$ 40 / child

\$100 (family with 3 kids or more)

Regular Registration Fee: (After August 10, 2008)

\$ 50 / child

\$120 (family with 3 kids or more)

***Fees include uniform and other club accessories**

MCAC Jumping F.R.O.G. Club Information

What is Jumping F.R.O.G. Club?

F.R.O.G. stands for Fully Rely On God. The Jumping F.R.O.G. Club is a MCAC-sponsored club program for boys and girls from Junior Kindergarten through Grade 5. This Christ-centered program

- integrates spiritual and personal development
- emphasizes evangelism and discipleship
- gives children opportunities to learn new skills, make friends, have fun and develop Christian values.

Why do children need a club?

Today's rapidly changing society can make children feel insecure. God uses their families and friends to help them develop a sense of belonging, and The Jumping F.R.O.G. Club is a place where they make friends and where opportunities are provided for them to

- develop skills and have fun
- experience successes and challenges
- make choices based on biblical principles

What is the purpose of The Jumping F.R.O.G. Club?

- Children program to support other Fellowship meeting
- To help children make Jesus Christ Lord in all areas of their lives
- To help all members form healthy relationships

When and where do the children meet?

Children meet on the second and fourth Saturday night (Sept 2008 to May 2009) from 7 to 9pm at MCAC

Club Kick-off Date: September 27, 2008

Club Closing Ceremony: May 23, 2009

MCAC – Jumping F.R.O.G. Club Official Receipt

Paid by Cheque # _____ Bank: _____ Amount: \$ _____
Received by: _____ Date: ____/____/2008

Child's Name: _____ Parent/Guardian's Name: _____

MCAC Jumping F.R.O.G. Club 2008

REGISTRATION FORM

*** ONE CHILD PER FORM ***

Last Name: _____ First Name: _____

Birthday (dd/mm/yy): _____ Age: _____

Grade (Sept 2008 School Year): _____ Gender: Male Female

Address: _____

Postal Code: _____

Parent/Guardian: _____ Relationship: _____

Phone No. (Home): _____ (Cell): _____

Parent/Guardian's e-mail address: _____

Emergency Contact: _____ Phone No.: _____

Is Parent/Guardian a Christian? : Yes No

Church Affiliation (if any): _____

Health Card No.: _____

Family Physician: _____ Phone No.: _____

Medical Concern/Allergies: _____

Food Allergies: _____

Please turn to next page >>>

For Office Use Only

Paid by Cheque # _____ Bank: _____ Amount: \$ _____
Received by: _____ Date: ____/____/2008

Receipt Issue: Y N