



You are cordially invited to  
Underground Junior High's  
McValentine's Dinner

**DATE:** FRIDAY, FEBRUARY 12TH, 2010  
**TIME:** 6:30-9:00PM  
(DOORS OPEN AT 6:30PM  
DEPART FOR MCDONALDS AT 7PM  
PICK-UP AT CHURCH AT 9PM)  
**PLACE:** MCDONALDS (DROP OFF AND PICK UP AT CHURCH)  
**COST:** ENOUGH MONEY TO COVER YOUR DINNER  
AT MCDONALDS

JOIN US FOR AN AMAZING NIGHT OF FUN, HANGING OUT WITH YOUR FRIENDS AND LAUGHING THE NIGHT AWAY WITH GOOD OL' RONALD MCDONALD. YOU CAN DRESS FORMALLY, SEMI-FORMALLY, OR JUST WEAR REGULAR CLOTHES. DON'T MISS OUT AND MAKE SURE TO INVITE YOUR FRIENDS!

Student Name: \_\_\_\_\_  
DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_ Tel: \_\_\_\_\_  
Parent/Guardian Name: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

This acknowledges that our student has permission to participate in the stated activity (McValentine's). I hereby give my permission to the physician or dentist selected by the church leadership to hospitalize, secure proper treatment, and/or order an injection, anesthesia, or surgery for my student as deemed necessary. I also understand that all activities are planned carefully and adequately supervised by mature adults. By signing this I assume and accept all risks and hazards inherent in church-related activities and agree not to hold the church or its employees or volunteer assistants liable for damages, losses, or injuries to the person or property undersigned.

Parent/Guardian Signature: \_\_\_\_\_  
Family Insurance Carrier & ID #: \_\_\_\_\_  
Prescription Medicine: \_\_\_\_\_  
Allergies: \_\_\_\_\_



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