



 **NXTJHI** 

Christmas 

ALL-NIGHTER

DECEMBER 14-15

9:30PM-7AM

\$20 BY 11.28 \$25 BY 12.12 \$30 DAY OF

**REGISTER ONLINE AT
CALVARYNAPERVILLE.ORG/EVENTS**



NXTjhi Crazy Christmas ALL-Nighter Registration Form

I _____ as the Parent/ Guardian of _____, understand that while every precaution will be taken to ensure the good welfare and protection of my child, Calvary Church, its staff and members acting on its behalf are hereby released from any and all liability in the event of an accident or misfortune, damage or loss that may occur to the student or property. In the case of a medical emergency, I give permission to the doctor chosen by the NXTjhi Staff to secure proper treatment for my child. I understand that every effort will be made to contact me before instituting such procedures. I agree to pay all such doctor, ambulance and hospital fees incurred on behalf of my child. I have included a list of any health information about my child that the NXTjhi Staff need to know. I grant Calvary Church my permission to photograph, videotape, and/or audiotape my student during Crazy Christmas All-Nighter activities. These photographs/videos/audios will remain the property of Calvary Church and may be used in promotion for Calvary Church activities and events.

(_____) _____ - _____ (home)

(_____) _____ - _____ (cell)

Parent Signature: _____

Parent Email: _____

Student Info:

First Name : _____

Last Name : _____

Grade: (CIRCLE ONE) 6th 7th 8th

How can I help out?

I am interested in being a chaperone for the Christmas ALL-Nighter. (circle one) YES / NO