

# Hey Kids!

## Join the



**Games, Songs,  
Bible & Christian  
Hero Stories, Prizes,  
Fun**

*Thursdays*  
3:15-4:30pm  
Hawks Rise Elementary  
Media Center

*(kids not in afterschool program will be supervised  
in Mrs. Letson's Room 509 until 3:15)*

Sponsored by *Child Evangelism Fellowship*<sup>®</sup> of the Big Bend in partnership with Four Oaks Community Church. *CEF* is dedicated to children between the ages of 5 and 12, providing Bible-based programs that demonstrate Christian values and beliefs. *CEF* has been active for more than 70 years and is involved in over 163 countries around the world. All children are welcome to participate in *CEF* activities regardless of race or background. *CEF* workers, paid and volunteer, have been screened and trained for the protection of each child. The local chapter is located at 4105 Crawfordville Road, Tallahassee, Florida. Phone: (850) 878-1558. For more information, you may also contact Scott Stake, Four Oaks Pastor of Children's Ministries, at 385-0004.

*Permission slips must be signed and turned in before any child may participate in a Good News Club on school property. Children in the after-school program should turn in permission slips to the Extended Day Coordinator. Permission slips for children who aren't in the after-school program should be turned in to Four Oaks Community Church or Mrs. Dana Letson (Hawks Rise 1<sup>st</sup> Grade Teacher).*

**(CHILD'S NAME)** \_\_\_\_\_ **has my permission to attend the**  
**Good News Club at Hawks Rise Elementary.**

**Address** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Church (if applicable)** \_\_\_\_\_

**Child's allergies (peanuts, chocolate, etc.)** \_\_\_\_\_

I give permission for my child to participate in any photographs taken by the *Good News Club* teachers for the sole purpose of promoting the *Good News Club*.

Would you like to receive information regarding other Christian activities in your community?  yes  no

**When Good News Club is over each week, my child**

**will return to the extended day/after-school program at the school**

**OR**

**will be picked up by me or by one of the following people:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Date:** \_\_\_\_\_ **Parent/Guardian Signature:** \_\_\_\_\_ **Phone:** \_\_\_\_\_