

W.O.W.

Afterschool Program @ West End Presbyterian Church

August 4, 2022

Dear Parents,

For anyone I have not yet been able to meet, my name is Elizabeth Nix and I am the new Director of Christian Education at WEPC. I am thrilled to be a part of this community and I am looking forward to starting things up in the fall, especially W.O.W.! This longstanding, afterschool faith enrichment program is a cornerstone of West End Presbyterian Church. Welcoming children and passing on the stories of faith to them is one of our community's core values.

W.O.W. provides children an opportunity to grow spiritually and nurture their faith in God through fellowship with one another, community service and creative expressions of faith through recreation, music, arts, and crafts. Our goal is to provide your child a safe place to learn, grow, and build community.

While I am new to W.O.W., our structure will remain the same as part years: WEPC will pick up children from West End Elementary School on Wednesdays and head to WEPC for some games and crafts, music, a snack, and exploring Bible stories. Parent Pick up will be at 5pm at the Crawford Center at WEPC. For children who do not attend West End Elementary School, please let me know so we can coordinate getting all children to W.O.W.

Enclosed in this packet you will find the following:

- Registration, Health History Forms and Permission Slips: Please fill these out and return them to the church.
- A tentative calendar of W.O.W. important events for 2022

Your support as a parent in this program is important to its success. We thank you and your child for being a part of this meaningful program at WEPC!

With gratitude,

Elizabeth Nix

Director of Christian Education, West End Presbyterian Church

dce@westendpres.church • 843-303-7275

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WOW Afterschool Program Fall Semester 2022

The Initial Schedule

2:30 - 3:10 p.m.	School Pick Up, Snack, Outside Time
3:10 - 3:30 p.m.	Bible Story
3:30 - 4:00 p.m.	Crafts
4:00 - 4:30 p.m.	Games
4:30 - 5:00 p.m.	Music
5:00 p.m.	Parent Pick Up

DATE	BIBLE STORY
September 14	John the Baptist (Mark 1:1-11)
September 21	Jesus Calling the Disciples (Matthew 4: 12-23, 9: 9-13, 10: 1-4; Luke 5: 1-11, 8: 1-3)
September 28	Jesus Walking on Water (Matthew 14:22-33)
October 5	A Wedding Miracle (John 2:1-11)
October 12	Zacchaeus (Luke 19:1-10)
October 19	Lord, Teach us to Pray (Matthew 6: 5-15)
October 26	Jesus Feeds the 5,000 (John 6: 1-14)
November 2	Road to Emmaus (Luke 24: 13-35)
November 9	Paul and Silas (Acts 16: 25-34)
November 16	Play Practice
November 30	Play Practice
December 7	Christmas Party

*We will be announcing further information regarding the Christmas Pageant that may impact scheduling.

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2022-2023 REGISTRATION FORM

- Fully complete the registration form and send images or digital version to Elizabeth Nix at dce@westendpres.church or drop off it by the church or mail to:
West End Presbyterian Church Attn:
W.O.W.
PO Box13
West End, NC 27376
 - There is a yearly fee of \$35 per child (\$50 per family maximum). Financial assistance is available. Please make checks payable to *West End Presbyterian Church* with "W.O.W." in the memo line.
 - Acknowledgment of your registration will be emailed to you upon receipt.
 - Contact: Elizabeth Nix: dce@westendpres.church or 843-303-7275 (Cell); 910-400-4079 (office)
-

Name _____ Nickname, if any _____

Age _____ Birthday _____ Gender _____

Grade in Fall 2022 _____ School _____ Homeroom Teacher _____

Home Church _____

Address _____

City, State, Zip _____

Parent Name(s) _____

Parent Best Phone Contact _____ Parent Second Best Phone Contact _____

Parent Email address _____

Emergency Contact Name _____ Relationship _____

W.O.W.

Afterschool Program @ West End Presbyterian Church

Emergency Contact Phone _____ Cell _____

W.O.W.

Afterschool Program @ West End Presbyterian Church

HEALTH HISTORY AND INFORMATION FORM

West End Presbyterian Church is deeply committed to providing the best possible care for your child at W.O.W. You can help by filling out this form (please print).

Name _____

Name of Child's Physician _____ Phone _____

My child is covered by the following health insurance:

Insurance Company Name _____ Policy Number _____

Mailing Address and Phone-----

_____ *We are not covered by insurance.*

Please respond to the following questions if you feel the information will be helpful to the W.O.W. staff.

- Is there anything we should know about your child that will help us provide the best possible care?

- List any activity restrictions:

- List any allergies, reactions and treatment given:

THIS MUST BE FILLED OUT IF YOUR CHILD HAS ANY MEDICATIONS TO BE TAKEN DURING THE DAY.

All medications (including aspirin) must be checked in with the W.O.W. staff.

I give my permission for the W.O.W. designated person to keep and administer the following medication:

Name of MED _____ Dosage _____ How often _____

Name of MED _____ Dosage _____ How often _____

Name of MED _____ Dosage _____ How often _____

Any special information concerning the medication?

Signed _____ Date _____

Parent /Guardian Signature

Photographic Release

West End Presbyterian Church

I hereby grant permission to West End Presbyterian Church and its respective licensees, successors and assigns, the right and permission, with respect to those photographs taken of me or the minor named below on whose behalf I am signing, and with respect to any printed matter in connection therewith, to do the following:

- To include such photographs in all editions of all publications designed and printed for church use, in all media, Internet, and in the advertising, publicity and promotion thereof.
- To use my name, or the name of the minor on whose behalf I am signing, in connection with the foregoing.

I hereby release, discharge and agree to indemnify and hold harmless West End Presbyterian Church and its legal representatives, licensees, successors and assigns, from all claims and demands whatsoever arising out of or in connection with the foregoing, and waive any rights to inspect or approve the same.

I hereby certify that I am the parent and/or guardian of, _____,
(print child's name)

a minor under the age of eighteen (18) years old, and hereby consent on behalf of said minor to the use of any of the photographs taken of said minor pursuant to the terms set forth in this Media Release Authorization, including, without limitation, the release, discharge and hold harmless provisions thereof.

Signature of Parent or Legal Guardian

Date

Printed Name and Address

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GENERAL PERMISSION SLIP

AND

EMERGENCY TREATMENT PERMISSION SLIP

W.O.W. bus and van drivers (all licensed) will pick up children from West End Elementary on Wednesday afternoons at 2:30pm. On occasion if the church bus or van is not available, staff or parents may provide transportation in their personal vehicles. In addition, W.O.W. periodically engages in field trips or special activities that require additional travel in the bus or van or staff/parent personal vehicles if church bus or van is not available. *Please initial.*

_____ I give my child permission to travel either on the church bus or van.

_____ I give my child permission to travel with WEPC staff or W.O.W. parents in their personal vehicles.

If in the event of an accident or injury during the course of W.O.W. that merits medical treatment, every effort will be made to contact the parents or emergency contact. However, if you cannot be reached, we will secure the services of the local emergency room or licensed physician.

_____ I give my permission to secure the services of the local emergency room or licensed physician if I cannot be reached.

_____ I agree that WEPC and its employees and volunteers will not be held responsible for accidents or personal injury arising there from.

Parent/ Guardian Name *(please print)* _____

Signature _____ Date _____