

The Ziebarth Family

Dear Parent or Guardian,

Parents consistently tell us the #1 reason they send their child to Bible Adventure is for the quality spiritual instruction. I am excited that you are considering this program for your child.

Every day we see how the biblical mentoring given by adults who lovingly care for your children (we have a ratio of 1 volunteer to every 2.5 children) will help them significantly improve their character and improve their outlook on life.

The benefits regularly translate into improved school performance and interaction with their peers. If we can answer any questions as you consider this valuable program, please give us a call.

- Aaron E. Ziebarth, Executive Director



Joy El Generation 3741 Joy-El Drive Greencastle, PA 17225



717.369.4539 info@joyel.org www.joyelgeneration.org

Igniting a generation that seeks Him!

Providing opportunities for people to experience life-change through personal encounters with God.

A non-profit, non-denominational faith-based ministry relying on gifts from churches, organizations, and individuals.

Academic benefits for your children!



Read more about the results parents are seeing in their children & learn more about the findings from The National Council on Crime & Delinquency and the participation in a Released Time Bible Program here:

www.joyelgeneration.org





A released time Bible program:
An opportunity
for public school students
to receive biblical instruction
from caring adults.



"I trust the leaders of this group and love that my child has their influence."

Parent of a Bible Adventure Program Student



Your Adventure through the bible awaits!





The program provides:

- A SAFE environment for learning.
- A place to BELONG where children are VALUED and LISTENED to.
- A place where SPIRITUAL QUESTIONS can be safely asked and addressed.
- An opportunity to **MEMORIZE SCRIPTURE** and **EARN AWARDS** that lead to discounts toward summer camp. A total of 300 points earns a week of FREE CAMP at Joy El Camps and Retreats!



The facts:

- A legal, state-approved program that allows public school students to be dismissed from school for biblical education.
- Provided by Joy El Generation for students beginning in 3rd grade.
- Held off school property during school and children are transported or walked by Joy El Generation volunteers with all required background clearances.
- Free to participants.
- Parental permission required. Students are enrolled on a first-come first-served basis. Children who register must attend weekly unless a parent withdraws the student in writing.
- School work missed while attending Bible Adventure can be made up.
- Bible Adventure IS NOT AFFILIATED IN ANY WAY WITH OR SPONSORED BY THE SCHOOL DISTRICT.

Your School Coordinator is:

Contact this person for information about Bible Adventure at your school.

Permission Form — Please PRINT clearly and legibly

Return completed form to your school

or REGISTER ONLINE here at www.joyelgeneration.org

Last Name F		First Name	Sex (Circle one) Male Female
Mailing Address		City / State	
Zip Code	Home Phone #	Student Cell Phone #	Birth Date
School during 2021-2022		Grade during 2021-2022	Homeroom / Teacher
Parent(s) or Guardian(s)		Parent Email	
Parent Work Phone		Parent Cell Phone ()	
Home Church (if any)		Church Phone	Church Email
Emergency Contact Name		Emergency Contact Phone ()	
Doctor		Doctor Phone ()	
Health Insurance Co.		Health Insurance Policy #	
List medications your child is	s allergic to, health problems, a	nd special behavioral or learnin	ng needs.
1. Would you be willing to serv	ve as a Bible Adventure volunte	er? Yes No	
2. Has your child attended Bible Adventure/Released Time before? Yes No			
	ool and what grade? d to participate in the Bible Ad	venture program. Registered s	tudents must attend
the Bible Adventure volunte	eer staff.		from the place of instruction by
			tendance at the religious sessions.
	way be responsible for medical	hild in print or electronic media treatment or liability resulting	from physical conditions existing
8. By providing an email addre Joy El programs to the addr	ss, I am granting Joy El permiss ess(es) provided.	ion to email news and informat	
		act on my behalf in my child's b nd/or doctor to treat or operat	
10. I give Joy El permission to r need medical attention.	elease insurance information t	o medical or hospital personne	l in the event that my child should
Parent Signature (My signa	iture implies consent for al		Date