## Join



# Today

For details on <u>program locations</u>, <u>start dates</u>, and <u>meeting times please visit our website or contact your School Coordinator for more information.</u>

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! Psalm 24:6

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!



For information from The National Council on Crime & Delinquency on results parents have seen in children who attend a Released Time Bible program click here:

www.joyelgeneration.org/bible-adventure/benefits/





A weekly released time Bible program for elementary students beginning in 3rd grade.

Public school students 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

Register Online: joyelgeneration.org



\*\*\*The Chambersburg Area School District does not sponsor or sanction this program/event/activity\*\*\*



Your Adventure through the Bible awaits!





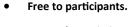
### THE PROGRAM PROVIDES:

- 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. Children are transported or walked to programs by Joy El Generation volunteers with all required background clearances.



- 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 (\*Required field)

or REGISTER ONLINE here at www.joyelgeneration.org/bible-adventure-permission-form/

* Last Name		me	* Sex (Circle one) Male Fen	
*Mailing Address		* City / State		
* Zip Code	* Primary Phone #	ŧ	Student Cell Phone #	* Birth Date
* School during 2025-2026			* Grade during 2025-2026	Homeroom / Teacher
* Mother/Guardian Name			* Mother/Guardian Email	
* Mother/Guardian Phone		Preferred Contact Method: Call Text Email	Home Church Name (if any	)
* Father/Guardian Name		* Father/Guardian Phone		
			* Father/Guardian Email	
Emergency Contact Name			Emergency Contact Phone	
Doctor			Doctor Phone	
Health Insurance Co.			Health Insurance Policy #	
List medications your child	is allergic to, health	n problems, and special b	pehavioral or learning needs.	
2. * Has your child attended I	Bible Adventure/Re		No No	
<ol> <li>I give permission for my cheach week.</li> </ol>	ild to participate in	the Bible Adventure pro	gram. Registered students r	nust attend
4. I understand my child will by the Bible Adventure vo		orted (van, bus, or perso	onal vehicle) to and from the	place of instruction
<ol> <li>Bible Adventure volunteer sessions.</li> </ol>	staff will serve in lo	co parentis for me to att	est to my child's attendance	at the religious
5. I give permission for Joy El	to use photos that	include my child in print	or electronic media for publ	icity purposes.
7. Joy El Generation will in no existing prior to my child a			or liability resulting from phy	sical conditions
	ess and phone num	ber, I am granting Joy El	permission to email and tex	t message news and
9. I give permission to the Bib	ole Adventure volun	iteer staff to act on my b	ehalf in my child's best inter	
	release insurance i		r hospital personnel in the e	
Parent Signature (My sign	nature implies co	esent for all above sta	atements.) Date	