



USO Requested Items:

Ramen noddle cups

Slim Jims/Beef Jerky

Tuna packets, all flavors

Bite size chocolate candy

Granola bars

Peanut sleeves

Trail mix sleeves

Rice crispy treats

Single serve cookie pouches

Applesauce cups

Nutella snack containers



SORRY, THERE ARE SOME ITEMS WE CAN'T ACCEPT

Chewing Gum Crayons/Markers

amen Noodles - bricks

Homemade Food Items

ed Toys

Hardcover/Paperback Books Styrofoam plates Greeting/Note Cards Magazines Older than 3 months Items Past Expiration

ALL Troy UMC STUDENTS 2021 Advent Series Sunday Series

As we prepare during this Advent season for the coming of Christ into the world, Troy UMC students are invited to go into the world to serve alongside those who care for college students, high school students in residential care, and active duty members and their families traveling during the holidays.



11:45 AM - meet at church Lunch "On the Road" will be provided 2021 Advent Sundays

12/05 and 12/12

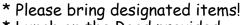
"Advent Go!" Information

Sunday Advent GO! Series 12/05 and 12/12



Student RSVP Form required "Go!" to serve others during Advent

11:45 AM Meet at Troy UMC 12:00 Noon Depart on Church Bus ~2:30 PM Return to Troy UMC (Student will text ETA)



* Lunch on the Road provided.

12/05 McKendree University, Lebanon, IL

BRING: individually wrapped snacks

for Final Exam Caré Bags LUNCH: McDonald's

12/12 USO - Lambert International Airport, St. Louis, MO
BRING: see Wish List - back cover LUNCH: Sugarfire Smoke House

Contact: Rev. Kurt Stone

Cell (618) 407-7586 kurt@troyumc.org











Troy UMC Student Registration & Release of Liability Advent Go! Wednesday Night Series 12/05/21 and 12/12/21

Name	Birthdate		
Address	Grade/School		
City	State	Zip	
Home Phone			-
Student's Cell			
Student's E-Mail Address			
Parent's Cell			
Parent's E-Mail Address			
Emergency Contact			
Phone			-

I indemnify, defend and hold harmless Troy United Methodist Church, Volunteer Staff, from all claims made and liabilities assessed against them as a result of the registrant's activities. Further, in case of emergency, I understand that every effort will be made to contact parents or guardians. However, if parents or guardians cannot be reached, or if I, the signed registrant am 18 years of age or older, I hereby give the Troy United Methodist Church permission to act on my behalf in seeking medical treatment in the event that such treatment is deemed necessary or advisable for the registrant's health, safety and welfare. I give permission to those administering medical treatment to do so, using the measures deemed necessary. I release the church, and medical providers from liability in acting on my behalf in this regard and rendering such medical treatment. I assume the risk and financial responsibility for any injury from the registrant's activities. I give permission to take and use photographs of my student for promotion of TUMC.

I am a Parent Guardian
Signed:
Printed name:
Health Insurance Company:
Policy Number:
Primary Care Physician:
Preferred Hospital:
Medical conditions or prescriptions: