



Upcoming Events

Friday Night Word of Life Club

8:00-10:00pm

Please make plans to pick your teen(s) up at 10:00pm sharp.

Second Sunday Teen Service

Every 2nd Sunday of each month.

7:00pm—9:00pm

Teens Involved

Teens Involved

Practice Every Sunday Afternoon—Check with coach or schedule for times.

Area TI - March 20 Cost \$17.00 plus \$6.00 for lunch

Meet at Church at 7:00am

Pick up a permission slip

Worship Event

Saturday Feb. 27

Meet at the church at 2:15pm.

Pick up permission Slip

Banquet at Bucca

Saturday April 3

First Baptist Church Word of Life Club

216 Sunset Rd.
Willingboro, NJ 08046

Phone: 609-871-2015 Ext. 115
E-mail: enewton@fbcwillingboro.org
Website: www.fbcwillingboro.org



Local Church
Ministries

10 House Rules

You must not leave the church after arriving for the evening or the event. If you leave, you may not come back into the building. (Your parents will be called to pick you up)

You must stay with the group unless you are otherwise instructed by a leader.

You must show respect for God and the instructor/worship leader. (No noise, or distractions while he or she is speaking to the group).

Hebrews 13:17 – Obey them that have rule over you and submit yourselves; for they watch for your souls, as they that must give account, that they may do it with joy and not with grief; for that is unprofitable for you.

No aggressive physical touching (punching, hitting, pushing, etc.) (If fighting, your parents will be called to pick you up).

Galatians 5:22-23 – But the fruit of the Spirit is love, joy, peace, long-suffering, gentleness, goodness, faith, meekness, self-control, against such, there is no law.

No public displays of affection (PDA)

Galatians 5:16 – Walk in the Spirit and you shall not fulfill the lust of the flesh.

No late arrivals without prior arrangements. WOL Club meets on Fridays from 8:00 to 10:00 PM. Advance notice will be given for all scheduled special and late night activities.

Do not bring/use the following items to meetings or activities unless otherwise instructed (CD players, CD's, iPods, mp3 players, electronic games, tobacco or alcohol products "contraband", food). (At the leader's discretion, your parents may be called to pick you up for breaking the following rule.)

Cell Phones must remain off and put away during the WOL Club time. They may only be used, when permission is granted by a youth leader, in the case of an emergency or to contact a parent or guardian.

It is expected that you bring your Bible to Club/Sunday School/Worship.

2 Tim. 2:15 – Be diligent to present yourself approved to God, a worker who does not need to be ashamed, rightly dividing the word of truth.

Exhibit a respectful demeanor. (NO foul language will be tolerated at any time at WOL Club or any youth activity.)

1 Timothy 4:12-13 - Let no one despise your youth, but be an example to the believers in word, in conduct, in love, in spirit, in faith, in purity. Till I come, give attention to reading, to exhortation, to doctrine.

These rules help our club accomplish our purpose of making disciples. If students continue to ignore or break the House Rules, parents will be contacted to discuss the matter and pick up the teen(s) from the meeting or activity or have him/her sent home at the parent's expense.

I will follow the guidelines and respect First Baptist's Leadership. I understand the consequences if I choose not to follow these rules.

Signature of Student

Print Name

I/We understand all of the guidelines and the potential consequences including being sent home at my/our expense. I have discussed these guidelines with my my/our child and am/are confident he/she will honor these guidelines and First Baptist's Leadership.

Parent's Signature(s)

AWANA SPARKS, T&T and WORD OF LIFE YOUTH GROUP REGISTRATION
1st Baptist Church of Willingboro, New Jersey

Child's Name: _____ Nickname: _____

Parent/Guardian: _____

Date of Birth: _____ Age: _____ Grade: _____ Gender (please circle): Male Female

Sparks (K/1/2) _____ T & T (3/4/5/6) _____ Word of Life (Jr/Sr High) _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Parent's Cell: (____) _____

E-Mail: _____

Church You Attend: _____

Medical: Please list any allergies (food, environmental, medications, bee stings) and the severity of the allergy, and if they take medication of any type. Please also let us know if your child needs to have an inhaler with him/her all the time (and knows how to use it) an Epi-pen or other medications (or if you would like an adult leader to hold onto the item).

Describe symptoms your child has during an allergic reaction: _____

List any medications taken on a regular basis: _____

List any disabilities (physical, emotional, learning) and/or physical restrictions: _____

List any medical conditions such as asthma, seizures, headaches, nose bleeds, etc.: _____

(Please use back of this form to note any additional information)

Name & Phone Number of a Relative/Friend: In case of an emergency, accident or illness, all reasonable efforts will be made to contact the parent/guardian. Please provide the emergency contact of a relative or friend to contact if you cannot be reached. Additionally, please let us know if there is anyone who is **not allowed** contact with your child/children (write on back of form). Please advise us of any changes throughout the year.

Emergency Contact: _____ Relationship: _____

Cell Phone: (____) _____ Home Phone: (____) _____

Also, please list the names, relationships & phone numbers of the adults authorized to sign your children out of club at the end of the night. Please advise us of any changes throughout the year.

Name	Relationship	Cell Phone Number

Signature of Parent or Guardian _____

Date _____

Please note none of the information provided is posted; it will be kept confidential.

Rev. 8/30/09-bc

**First Baptist Church
Willingboro, NJ**

What
Worship Event

Where:
Shawnee Baptist Church
Shawnee, NJ

When:
Saturday, March 6, 2010

Meet at church: Saturday, March 6 at 2:15pm
What time do we get home: Saturday, March 6 at 9:00pm
Will have your teenager call you when we are getting close to First Baptist Church

Do not tear or cut on this line

Permission/Reservation Slip:

Teen's Name: _____ is permitted to go and will participate in this activity on Saturday, March 6, 2010 with the First Baptist Church of Willingboro. I authorize medical personnel selected by the Group Leader to secure proper treatment for the child named above in the event that I am unable to be reached during a medical emergency.

In the event of an emergency, contact the following person(s):

Parent/Guardians Name: (Please Print)

Address: _____

Signature of Parent or Guardian

Emergency Telephone #'s

Signature of Teen

Print Teens Name

Person(s) in charge of Activity Pastor Eddie Newton

**First Baptist Church
Willingboro, NJ**

What

Teen Involved

Where:

New Durham Chapel
Piscataway, NJ

When:

March 20, 2010

Meet at the church: Saturday, March 20 at 7:00am

Arriving back home: Saturday, March 20 at 5:00-6:00pm

Will have your teenager call you when we are getting close to First Baptist Church

Do not tear or cut on this line

Permission/Reservation Slip:

Teen's Name: _____ is permitted to go and will participate in this activity on Saturday, March 20, 2010 with the First Baptist Church of Willingboro Word of Life Club. I authorize medical personnel selected by the Group Leader to secure proper treatment for the child named above in the event that I am unable to be reached during a medical emergency.

In the event of an emergency, contact the following person(s):

Parent/Guardians Name: (Please Print)

Address:

Signature of Parent or Guardian

Emergency Telephone #'s

Signature of Teen

Print Teen's Name

Person(s) in charge of Activity Pastor Eddie Newton