

# *Gleanings* 2018

**SUNDAY, AUGUST 5<sup>TH</sup> – SATURDAY, AUGUST 11<sup>TH</sup>**

*We are excited that you will be serving with us at Gleanings this summer. By partnering on this trip you will be tangibly extending God's love to people around the world as you help them meet physical, and more importantly, spiritual needs. This packet has all the information and forms you'll need to prepare for your trip.*

## **I. HOW TO REGISTER**

**TO REGISTER, YOU MUST TURN IN THE FOLLOWING THREE ITEMS. YOU CAN ALSO COMPLETE ALL OF THESE STEPS ONLINE AT [GATEWAYBIBLE.ORG/YOUTH](http://GATEWAYBIBLE.ORG/YOUTH).**

1. Complete the **GATEWAY MEDICAL RELEASE FORM** (at the back of this packet).
2. Complete the **GLEANINGS RELEASE FORM** (at the back of this packet).
3. Turn in your payment of **\$150** in cash or write a check to **GATEWAY BIBLE CHURCH**. This price includes food, lodging, and transportation! (students may want to bring an additional \$30-40 for activities and snacks).

## **II. IMPORTANT DATES/TIMES**

- **SUN, AUGUST 5<sup>TH</sup> @ 10:30AM – DEPARTURE.** Report to Gateway Bible Church. *Don't be late!* We'll load up in the parking lot and go to the second service together.
- **SAT, AUGUST 11<sup>TH</sup> – RETURN.** We will return between 4:00 and 6:00PM.

## **III. SLEEPING ARRANGEMENTS**

Gleanings has dorm accommodations for its volunteer workers. The rooms are made up of twin size bunk beds. Each person will need to bring a *pillow* and *sleeping bag / sheets*. Leaders will be assigned to each dorm room for supervision.

## **IV. TECHNOLOGY**

One of the reasons this trip is so impactful is that it gives us an opportunity to sacrifice certain things for something greater in return. We believe that God wants to capture our undivided attention and speak to us. That is why we are **TAKING A BREAK FROM ALL TECHNOLOGY**, so leave your iPods, video game devices, laptops, etc. at home (you can bring a phone to contact parents only). You are free to bring a deck of cards, small board games, etc.

## **V. DAILY SCHEDULE + EVENING ACTIVITIES**

Here is what a typical workday at Gleanings will look like:

<b>7:00 AM</b>	<b>BREAKFAST</b>
8:00 am	Worship in the dining hall
9:00 am	Work duties assigned: work starts
10:00 am	Break (15 min)
<b>12:00 PM</b>	<b>LUNCH</b>
1:00 pm	Work
2:30 pm	Break (15 min)
<b>5:30 PM</b>	<b>DINNER</b>
~ 8:00 pm	Gateway Group Recap and Devotions (times will vary)
10:00 pm	Quiet Time
11:00 pm	Lights out (everyone in bed)

- **MONDAY:** Missions Night – One of their staff will share about the ministry of Gleanings for the Hungry and a location where food has been distributed.
- **TUESDAY:** Free Night
- **WEDNESDAY:** Swimming Pond/Water Park – We end work early to go to a nearby swimming pond (free) or water park (\$10.50).
- **THURSDAY:** Bowling Night – Optional bowling in Dinuba for \$10 per student.
- **FRIDAY:** Love Feast – This night is a highlight. It starts at dinnertime and ends around 8pm. They will have a themed dinner, worship, and a guest speaker with an evangelistic message. Students have created a tradition of “dressing up” to this event; it’s not mandatory but it adds to the occasion!

## **VI. WORK CONDITIONS + HEALTH ALERT**

The majority of our work will be in a shaded factory where the peaches are cored and put on pallets – It is sticky and monotonous! The rest of our work will be laying out the fruit to dry in the fields – It is extremely hot and exhausting!

WARNING: If anyone has allergies to **SULFUR** or **PEACHES/NECTARINES**, Gleanings asks that you use caution if you plan on participating, as you will come into direct contact with these.

## **VII. BEHAVIOR EXPECTATIONS**

Remember that we head out to Gleanings representing Jesus Christ and Gateway Bible Church. Bring a **GRATEFUL HEART AND ATTITUDE**, and keep in mind why you are going in the first place. He desires our willing hands and hearts to help feed people who are starving and to send them the message of His love.

# **WHAT TO BRING**

- ☐ Bible (physical, not an app on your phone!)
- ☐ Journal
- ☐ Water bottle
- ☐ Hat
- ☐ Sunscreen
- ☐ Sleeping bag or twin sheets
- ☐ Pillow
- ☐ Soap and shampoo
- ☐ Personal toiletries – toothpaste, toothbrush, kleenex, moisturizer, chapstick etc.
- ☐ Bath towel, beach towel
- ☐ Bathing suit (See Dress Code)
- ☐ Work clothes (these *will* get stained!)
- ☐ Work shoes (must be close-toed)
- ☐ Work gloves
- ☐ Casual clothes (for after work)
- ☐ Sandals
- ☐ Extra money (\$20-\$30) for dinner stop, bowling night, and snacks

## **Other Optional Items**

- ☐ Flashlight
- ☐ Rubber / latex gloves (for working with peaches)
- ☐ Sunglasses
- ☐ Snacks for the dorms
- ☐ Scarf or bandana
- ☐ Alarm clock
- ☐ “Fancy” outfit (for the Friday Love Feast)

## Medical and Liability Release Form



Student name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact/s (Relationship to Student) \_\_\_\_\_

Emergency cell#: Parent Cell phone ( ) \_\_\_\_\_ Parent email: \_\_\_\_\_

### Health History (please explain any condition we should be aware of):

Allergies (insect stings, drugs, food, etc.) \_\_\_\_\_

Normal treatment of allergic reactions: \_\_\_\_\_

Please detail and explain any other conditions (diabetes, asthma, epilepsy, etc.) \_\_\_\_\_

Medication(s) currently taking: \_\_\_\_\_

### Insurance:

Our church's insurance is only secondary insurance. If you have medical insurance, your carrier will be billed for medical charges in the case of illness or injury while participating in activities or in the church premises.

Your Insurance Company \_\_\_\_\_

Address: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Phone #: \_\_\_\_\_

### Liability Release:

Every activity sponsored by this church is carefully planned and adequately supervised by mature adults. However, even with the best of planning and precaution, unforeseen events can occur. By signing this form, you agree to assume and accept all risks and hazards inherent in church-related social and sport activities including transportation to and from activities. You also agree that you will not hold GateWay Bible Church or its employees or volunteer assistants liable for damages, losses or injuries to the person named on this form. You understand that this form and your signature are for both medical and liability release.

### MINOR LIABILITY RELEASE (Required for those 17 & under)

I give permission for my child, \_\_\_\_\_, to participate in all activities as part of the ministry of GateWay Bible Church of Scotts Valley, California. As parent or legal guardian of said minor, I accept full responsibility for my child's participation in G.W.B.C. activities including transportation to and from any location in connection with G.W.B.C. events. I will assume full responsibility for any medical costs incurred in the event of an emergency in which my child is in need of immediate hospitalization, medical attention or surgery, and after reasonable efforts have been made to contact me or my spouse and we cannot be located for the purpose of consenting thereto, consent for the emergency attention may be given to any person loco parentis to my child pursuant to A.R.S. § 44-133. It is understood that my child will obey all regulations and follow instructions of the leaders. I agree to pay any expenses including the cost of my son/daughter being sent home if discipline is deemed necessary.

Signature of Legal Parent/Guardian (Required for those 17 & under): \_\_\_\_\_ Date: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Signer's Name: \_\_\_\_\_

- I can drive (# of seats in car) \_\_\_\_\_ students to or from camp.
- I have a vehicle I can loan for this trip with \_\_\_\_\_ seats.

## Mandatory Release Form – Minor(s)

Name of each minor participant to which this signed document applies:

_____	_____
_____	_____
_____	_____
_____	_____

### Release of Liability

I \_\_\_\_\_ (*first and last name of parent or guardian*) do hereby release **Youth With A Mission/ Gleanings For The Hungry**, Inc., its agents, and volunteer assistants from any liability whatsoever arising out of any injury, damage or loss which may be sustained by the participant during the course of involvement with **Youth With A Mission/Gleanings For The Hungry** from \_\_\_\_\_ (*arrival date*) to \_\_\_\_\_ (*departure date*).

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(*Parent or guardian*)                      Month    Day    Year

### Consent For Treatment

In case of emergency, I \_\_\_\_\_ (*first and last name of parent or guardian*) hereby agree to the performance of such treatment, including anesthesia and surgery, as the attending doctor or physician may deem necessary. I also accept full responsibility for expenses related to medical care.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(*Parent or guardian*)                      Month    Day    Year

### Contact in case of emergency:

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Relationship to contact person: \_\_\_\_\_