# urban Plunge Schedule

#### Friday

7:00 p.m.	Group arrival at Bethany Lutheran Church
7:15 p.m.	Introductions
7:30 p.m.	Reflective Activity #1: Diversity Exercises
8:45 p.m.	Break with Evening Snack
9:00 p.m.	Tour of Bethany Lutheran Church
9:15 p.m.	"Personal Narrative" Activity
9:45 p.m.	Reflection and Goals for Tomorrow
10:30 p.m.	Sleep! (board games, gym time, movies, DVDs)

<sup>\*</sup>Remember to dress for outdoors Saturday, which involves walking and on/off light rail.

### Saturday

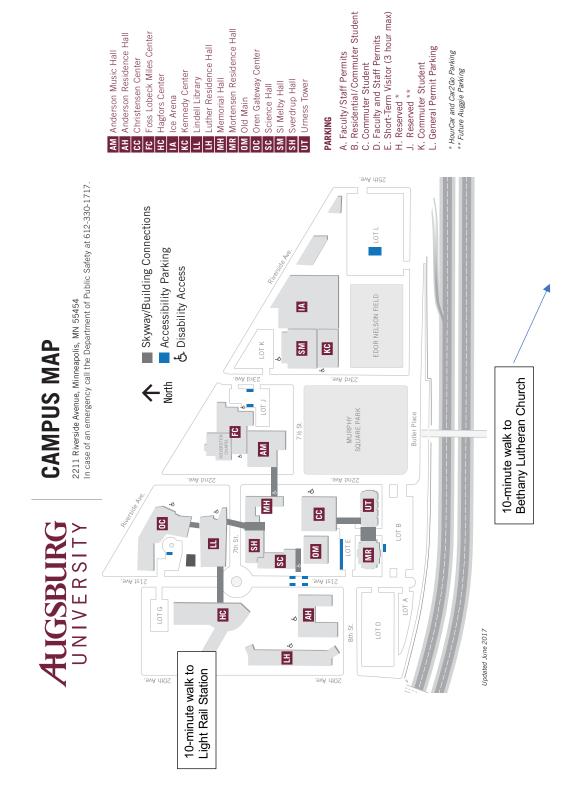
Light breakfast at Bethany
Walk to Augsburg University & Mini-Tour of Campus
Reflective Activity #2: Cycle of Exclusion
Reflective Activity #3: "Sermon on the Mount"
"Word on the Street" Orientation
Pizza Lunch
Depart for "Word on the Street" Experience
Return to Campus & Debrief the "Word on the Street"
Experience
Closing
Departure



## urban Plunge covenant

Event Dates:			
Congregation:			
Address:			
Church Phone:			
Contact Person:	Contact Title:		
Contact Phone:	Contact email:		
Approximate number of participants* (including	ng adults):		
Age range of youth:	(High school, middle school)		
Guides to share their faith in settings both on	p may join you. east 5 days in advance of any special dietary participant or chaperone.  ge provides an opportunity for Augsburg Student and off the college campus. e request AT LEAST ONE (1) ADULT CHAPERONE PER HIGH SCHOOL YOUTH Plunge. We also recommend reading "Help insuring Safe Boundaries" is also		
I/WE agree to the above covenant.			
Signature (Contact):	Date:		
Please return with down payment of \$100 to:			







## Urban Plunge Light Rail Map





#### Urban Plunge Participant Health History

This form helps the staff of the Augsburg University Urban Plunge program be fully aware of any medical condition you or your child may be experiencing during the program. Please be open and honest with us. All information on this form is confidential and limited to viewing by the Augsburg University Urban Plunge and Campus Ministries staff.

### <u>IMPORTANT:</u> IF REGISTRANT IS A MINOR (under 18 years of age): PARENT OR LEGAL GUARDIAN <u>MUST</u> SIGN.

Please Print Clearly			
Name:		Gender:	Birth date:
Last	First		
Responsible Parent/Guardian	(if registrant is a min	nor):	
Address:			
City:		Stat	te: Zip:
Phone W: ()	H: ()		C: ()
Emergency Contact:		Phone	W: ()
Name of Your Physician:		Phon	e: ()
INSURANCE: You are financial **In case of emergency, send	, .	•	cument.**
Policy Holder:Number:		Policy	
HEALTH:			
Do you have any special med time at Urban Plunge?	dical/mobility needs	the staff needs	to be aware of during your
If yes, please explain your situ	ation and needs:		

- CONTINUED ON BACK -



Please use additional sh	eets it more space is ne	ecessary.	
Medication Name Medication	Dosage	Time Taken	Reason for
Are there any medication	ons that the student atte	ending Urban Plunge should not	be given?
ALLERGIES: Do you have allergic red If Yes, please describe:	actions to foods, medica	ations, or other substances? Ye	es No
Does this cause anaphy Describe reaction and v		e it:	
FOOD NEEDS/PREFERENCE Please let us know of an		or preferences:	
Any other food/health o	concerns?		
My child has permission program. In the event I ophysician selected by the proper treatment for, to	to engage in all activitie cannot be reached in c ne Augsburg University U order injection, anesthe olies to day trips off the	NEEDED IF REGISTRANT IS A MING es at the Augsburg University Urb an emergency, I hereby give pe Irban Plunge program to hospite esia or surgery for my child as no Augsburg campus. It is the polic ious injury or illness.	oan Plunge ermission to the alize, secure amed on this form
Parent/Guardian Signat	ure:	Dat	e:
Parent/Guardian Name	(Print):		

MEDICATIONS: Note: All medications must be kept secure and are not to be shared with other



urban Plunge Participant R	elease
1	, willingly participate in the Augsburg University
Urban Plunge program.	
benefits, but also may involve certain risks of event of an injury and/or property damage	rg University Urban Plunge program offers many and hazards of injury and/or property damage. In the incident, I acknowledge that I may experience a egation sponsor, or in receiving immediate medical
for any and all damage or injury to myself of	an Plunge sponsored events. I release and waive any
I agree that if I am not behaving in a mann hosting organization regulations on good co	er that is consistent with Augsburg's mission or the onduct, I may be asked to leave the event.
on and off Augsburg property, during day of motorized vehicles. Such events and activit using candles, fire, certain tools, arts and cr	ents may include but are not limited to activities both and evening hours, requiring transportation by ies may involve the preparing and eating of food, afts supplies and other materials, some events may such as, but not limited to large group games, hiking and other outdoor activities.
I further acknowledge that I am responsible	for my personal health insurance coverage.
invalid by any court of competent jurisdiction	ent and Release, or portions thereof, be found to be on, the remainder of this Agreement and Release fect. This Agreement and Release shall be construed
I HAVE CAREFULLY READ THIS AGREEMENT A SIGN IT OF MY OWN FREE WILL.	ND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I
Participant Signature	Date
Participant Name (Print)	
IMPORTANT: IF REGISTRANT IS A MINOR (und PARENT OR LEGAL GUARDIAN MUST SIGN.	der 18 years of age):
I am the Registrant's parent or legal guardic own behalf and on behalf of the Registrant	an. I am signing this Agreement and Release on my and his/her heirs and assigns.
I HAVE CAREFULLY READ THIS AGREEMENT A SIGN IT OF MY OWN FREE WILL.	ND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I
Parent/Guardian Signature	Date
Parent/Guardian Name (Print)	



## Urban Plunge Packing List

- ♦ Sleeping bag & pillow (cots are provided)
- Toothbrush and toothpaste
- ♦ A change of clothes
- ♦ Clothing for the weather (we will be outside for 1-2 hours)
- ♦ Walking shoes
- Water bottle
- ♦ Snacks for Saturday afternoon (optional)
- ♦ Open mind
- DVDs/videos of movies appropriate for group to watch in free time
- ♦ Board/card games appropriate for group to play in free time
- Anything else needed for a one-night stay (medication, special snacks or foods that are needed, etc.)

