## Southgate Swim Team 2008 Saturday, July 12<sup>th</sup> Penguin Power

## **Potluck and Overnight**

**Potluck** 6:30 p.m. To 8:00 p.m.

**Overnight** 8:00 p.m. To 7:30 a.m.

The Team will provide: plates, napkins, utensils, cups and punch, & a hot grill

You **bring:** A-M salad for 12

N-Z dessert for 12

Meat to grill

THE OVERNIGHT 8:00 p.m. to 7:30 a.m.

Gates close at 11:00 p.m. for the night

Pool open until midnight

**Be sure to bring:** Sleeping bag / ground cloth

Tent

Snacks for the evening

Games, videos Water rafts

Skewers for roasting marshmallows

**The NO NOs:** No alcoholic beverages

No squirt guns or water balloons

No tents in the area until after the pool closes at 8 p.m.

No glass containers

All parents are needed 7:00 a.m. to supervise the clean-up.

Juice and donuts will be provided after the clean-up!

This is a fun family event. Your participation is encouraged. If you are unable to stay with your child, you must designate an adult who is attending the sleep over and has agreed to be available for your child. One adult may not be responsible for more than five children. Please do not bring guests.

Each swimmer must have a completed slip on file. Please complete the following slip and return it to the coaches by Wednesday July 9<sup>th</sup>, 2008.

## Permission for Penguin Overnight – July 12th 2008

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Southgate Sv	vim Tea	am overnight on	Saturday, July	/ 12th, 2008	. I understa	ind that he /	
she must foll	ow the	established club	b and team rul	es and that	I will be cal	led to take	
him/her home	e if this	is not the case.					
Ø.	Number of family members attending						
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<b>N</b> '/	I nlan	to attend the ov	ernight myself	Yes.	No:		
<b>J</b>	I plan to attend the overnight myself. Yes: No:				<u> </u>		
	If NO,						
	Name of adult over 21 in attendance who has agreed to be in charge of						
	my ch	ila:					
	/ NIa -						
	( INO 8	adult may be res	sponsible for n	nore than 5	children.)		
<b>-</b>							
Emergency p	onone n	number where I	may be reache	ea auring th	e nignt:		
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Print Parent	name:					<del>_</del>	
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Parent Signa	ature: _					_	
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Please check	any of	the following th	at you are able	e to donate	or iena:		
IV/VCR	CR Kindling & Wood			\$ for Dor	iuts	Juice	
Hot Chocolate Marshmallows _						Ice	
Video's		Graham Crack	kers	Chocolat	e Bars		
	We wi	II contact you to	confirm that w	∕e need you	r donation !		
		eryone <b>A</b> chieves					
POTLUCK ar	nd / or C	OVERNIGHT, pl	ease check an	y jobs you a	are intereste	ed in.	
Set grill for barbecue			Over see	Over see chocolate during night Supervise s'mores Make a.m. coffee early			
Set up	Set up buffet Make lemonade						
Make I							
	up buffe			Set out juice / napkins			
		/ hot water		Clean up fire			
		during night		•			
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**MANY THANKS!** 

PLEASE RETURN THIS FORM TO THE COACHES BY WED., JULY 9th, 2008



NO GUESTS ALLOWED – This event is for Swim Team Members & their immediate families only. Insurance will not cover any other persons at the pool or in the parking lot.