SEPTEMBER

Thursday, September 10 5:30 – 9:00 p.m.

Anna's House

Anna's House is a transitional home for single moms in Bel Air. We will be watching and interacting with the children while their moms take a 2 hour training class. We will depart from the parish office at 5:00 p.m. and return around 9:00 p.m. We are in need of 5-6 volunteers. Please contact Mr. Rich ASAP if you can volunteer. Permission slip is required.

Saturday, September 12 10:30 a.m. – 1:30 p.m.



Gunpowder Nature Walk

Join us as we take a hike on a nature trail around Gunpowder Falls. We will be going to the trail that is right off of Belair Road, across from the Gunpowder Lodge. We will meet at the youth room at 10:30 a.m. and return approximately 1:30 p.m. Everyone should bring their walking shoes, a picnic lunch and a drink. There is no cost. Permission slips are required and must be with turned in when you show up. Parent drivers are needed.

Saturday, September 19 5:00 Mass 6:00 – 9:00 Topic & Gym Night



Topic Night & Open Gym Night: Who said it?

First, join us as we begin our evening with 5:00 mass in the church. We then will have our monthly topic night followed by an open gym night. Our topic will take a look at famous quotes. We will discuss who said it and what does it mean. We will also collect money for the chicken dinner and 50/50 tickets as well as coordinate our volunteers for the dinner. Hot dogs will be provided. Please bring soda, snack and/or a dessert. Bring a friend!

SEPTEMBER

Saturday, September 19 Sunday, September 20

Ticket Sales

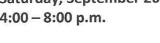
We will be selling Chicken Dinner tickets following all of the masses. Volunteers are needed.

Sunday, September 20 12:00 Noon

Worthy of the Call

The Archdiocese requires that high school age youth, who volunteer with younger children, complete a program entitled "Worthy of the Call". Mrs. Nikki Lux will be offering the program from 12:00 noon to 1:30 p.m. at the parish office. You must sign up by calling the parish office at 410-665-1054 or contacting Mr. Rich.

Saturday, September 26 4:00 - 8:00 p.m.





Chicken Dinner Fundraiser

This is an important event and will be our main fundraiser for the year. All of the proceeds will go to support our youth ministry program. A flier will be sent out with more information. What do we need from you?

- 1. Invite your family and friends to the dinner. Tickets will be available at the topic night and by contacting Mr. Rich.
- 2. Sell the 50/50 tickets. Tickets will be available at various youth group events for you to take home.
- 3. Volunteer to help at the dinner. We will need help setting up, serving and cleaning up.

Fried Chicken Dinner Saturday, September 26 from 4:00 to 8:00 p.m. School Gym

Adults: \$10.00

Kids Meal (10 or under): \$7.00

(Additional \$2.00 if purchased at the door)

50/50 drawing at 8:00 p.m.

Proceeds benefit St. Michael's High School Youth Ministry

OCTOBER

Sunday, October 4 6:00 – 8:00 p.m. Youth Room

Saturday, October 17 6:00 – 9:30 p.m.



Friday, October 30 6:00 – 8:30 p.m. School Gym



Topic Night: Dating & Sexuality

What do I look for in boyfriend or girlfriend? What makes a good date? How far is too far? When do I know it is time to break up? How should I end the relationship I am in? Join us as we discuss issues related to dating, relationships and sexuality. We will meet in the youth room. Permission slips and money for Beachmont Corn Maze will be collected.

Beachmont Corn Maze

Join us and your favorite Starr Warz characters for an adventure in the 6-acre interactive corn maze with over 2 miles of pathways. The theme this year is STARR WARZ: Return of the jedhi. This is located at Beachmont Christian Camp on 6433 Mount Vista Rd. in Kingsville. In addition to the corn maze there will be a bonfire, hayride and other fun activities. The cost is \$10.00 per person. Additional money may be needed for concessions. We will meet at the youth room at 6:00 p.m. and return at 9:30 p.m. Permission slips are required. Parent drivers needed.

School/Parish Halloween Party

We will be planning and hosting a Halloween party for the school and parish children. Volunteers are needed to decorate, set up, serve food, organize games and give out candy. People are also asked to bring candy to give out. This is a service project for our school and parish. More details will be given. Please sign up in advance.

Youth Group Gossip

Who got the raw eggs?

Do you love your neighbor?

Did Fr. Chuck really write his own song?

Who did some gardening in the mulch outside Camden Yards?

Who is the parent that took a short cut to the Oriole Game and arrived late?

Who said sleeping was the highlight of their summer?

Did Homer see the light?

Who was launched the furthest on the infamous "BLOB"?

Did anyone survive the turntable platform?

Did everyone get everything off of the bus?

What is Allison's dream car?

Can you talk without saying anything?

Who put a baseball threw a stain glass window 30 year ago?

Can Kate handle the heat?

What are the keys to success in high school?

Be part of our story

Permission Form

Youth Name:	Home Phone:	
	Parent cell:	
	Youth e-mail:	
Address	City/State/Zip	
	Date of Birth:	
Emergency Contact (Name & Phone	#)	
activity (event/date/time): Anna's Hould In consideration of the opportunity for acknowledged, I knowingly and volunt HARMLESS AND INDEMNIFY St. Mich Catholic Archbishop of Baltimore and agents, employees, officers, directors from any liability, claims, demands a death) sustained in connection with or acknowledge that my child's participation disability, death, and/or economic loss inherent risks of the activity, the rule elected to allow my child to participate understand that my child's participation that the Released Parties do not scree it is my sole responsibility to make cer I understand that the Released Partie my child, however, I hereby grant pephysician, hospital, or medical clinic for (Check one of the following:)	ther, I do hereby agree to allow my son/daughter to participate use: 605 N. Tollgate Rd, Thursday September 10, 2015, 5:30 to r my son/daughter to participate in the activity, the receipt and rarily on behalf of myself and my minor child do hereby agree to real the Archangel Parish, the Division of Youth & Young Adhis successors, a Corporation Sole, and all their affiliate orgals, volunteers, and any officials, referees, and other participant of causes of action arising out of or relating to any loss, dair arising out of my son/daughter's participation in the activity. It ion in the activity involves inherent risk of minor or serious injustes which might result from my child's actions or inactions, the sof play, the condition of the premises, or of any equipment the, and I fully understand, appreciate, and hereby assume all ion in said activities may require a minimum level of fitness for my medically or otherwise, individuals that participate in the activity and not provide medical treatment or medical, health or otherwission for any staff member of the activity to obtain medical or my son/daughter in the event that I cannot be reached.	d sufficiency of which are of orever RELEASE, HOLD lult Ministry, the Roman nizations, and respective its (the Released Parties) mage or injury (including By my signature below, I ury, including permanent negligence of others, the used. I have voluntarily such dangers and risks. I or safe participation, and tivity. I acknowledge that pate in the activity. I are insurance coverage for ical care from a licensed
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I hereby grant permission to any staff my son/daughter if requested by my s Tylenol/Acetaminophen Benadr Neosporin/Antibody Ointment Doses of such drugs will be provided in	yl Diphenhydramine 🛮 Advil/ Ibuprofen 🗖 Imodium/ Antidian	rheal kaging.
ADD any dietary restrictions:		
publications, websites or other materi Adult Ministry or the Archdiocese of B consent). Parents/guardians who do activity staff member. Please note tha recording taken by media that may be	advised that photographs or digital recordings of participants mials produced from time to time by the St. Michaels, Division of saltimore. (Participants will not be identified, however, without not wish their child(ren) to be photographed or digitally record the Released Parties have no control over the use of photographed covering the event in which your child(ren) participate(s). GREEMENT, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIG	Youth & Young specific written orded should so notify an aphs or digital
Date	Parent/Guardian Signature	
	Parent/Guardian Name	

Permission Form

Youth Name:	Home Phone:	
	Parent cell:	
Parent e-mail:	Youth e-mail:	No
Address	City/State/Zip	
Youth Cell:	Date of Birth:	☐ Male ☐ Female
Emergency Contact (Name & Phone #)_		
activity (event/date/time): Gunpowder Machine In consideration of the opportunity for macknowledged, I knowingly and voluntaril HARMLESS AND INDEMNIFY St. Michael Catholic Archbishop of Baltimore and his agents, employees, officers, directors, volume from any liability, claims, demands and death) sustained in connection with or an acknowledge that my child's participation disability, death, and/or economic losses inherent risks of the activity, the rules of elected to allow my child to participate, understand that my child's participation that the Released Parties do not screen, mit is my sole responsibility to make certain I understand that the Released Parties do my child, however, I hereby grant permit physician, hospital, or medical clinic for medical clinic	Acture Walk – Saturday, September 12 – 10:30 a.m. to 1:30 p.m. by son/daughter to participate in the activity, the receipt and sure you behalf of myself and my minor child do hereby agree to foll the Archangel Parish, the Division of Youth & Young Adult is successors, a Corporation Sole, and all their affiliate organization of action arising out of or relating to any loss, damagnising out of my son/daughter's participation in the activity. By in the activity involves inherent risk of minor or serious injury which might result from my child's actions or inactions, the negligible for the condition of the premises, or of any equipment used and I fully understand, appreciate, and hereby assume all such in said activities may require a minimum level of fitness for some instance of the provide medically fit and healthy enough to participate to not provide medical treatment or medical, health or other in ission for any staff member of the activity to obtain medical by son/daughter in the event that I cannot be reached.	m. ufficiency of which are prever RELEASE, HOLD Ministry, the Roman ations, and respective (the Released Parties) ge or injury (including my signature below, I including permanent gligence of others, the ed. I have voluntarily the dangers and risks. I afe participation, and y. I acknowledge that e in the activity.
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ADD any dietary restrictions:		
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Date	Parent/Guardian Signature	
	Parent/Guardian Name	

Permission Form

Youth Name:	Home Phone:	
Parent Name:	Parent cell:	
Parent e-mail:	Youth e-mail:	
Address	City/State/Zip	2 - 2 - 3 - 4
Youth Cell:	Date of Birth:	Male 🗆 Female
Emergency Contact (Name & Phone #)_		
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I hereby grant permission to any staff menmy son/daughter if requested by my son/d□Tylenol/Acetaminophen □ Benadryl D□ Neosporin/Antibody Ointment □ PepiDoses of such drugs will be provided in acc	iphenhydramine □Advil/ Ibuprofen □Imodium/ Antidiarrheal	
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