

Week Of Service

“All Salem Youth working side by side, on a mission to serve older members of Salem Church.”

Dear Salem Youth Members,

It is time once again for our annual week of service! The week of service, which is planned for May 5-May 9, is a week set aside for all Salem youth members to come together and help out a few members of our church family. Everybody in TGIF, KFC, and YSOS is encouraged to come help out at least one of these evenings, and invited to come out and help as many evenings as you wish! Each year the week of service is a lot of fun, and a huge success. We expect this year to be just as exciting!



What types of things will we be doing? Good question! We will be doing whatever needs to be done to help out! Last year we helped with some landscaping, some cleaning, and did a bit of painting. We will do whatever needs to be done.

When will we be doing this work? We will be forming work crews to go out each evening from May 5 – May 9. The crews will meet at the church around 5:00 PM, and return after the sun goes down (or all the work is done).

Why are we doing this? We are doing this because it is a practical way for us to help out our church family. The people we will be helping have supported the youth at Salem in ways too numerous to list. This week of service is one small way that we can give back to them!

For even the Son of Man did not come to be served, but to serve

How can I get involved? Since we need to assemble the work crews a week in advance, we need you to fill out the enclosed signup form and return it to the church by **Sunday, April 27, 2008**.

Please don't hesitate to contact me with any questions. You can call me on my cell at 484-332-0955.

Rich Peachey

Week Of Service

“All Salem Youth working side by side, on a mission to serve older members of Salem Church.”

Student Sign Up & Permission Form

Name of Youth	Monday	Tuesday	Wednesday	Thursday	Friday

(Indicate which days you will be able to help out. You may sign up for more than one day!)

Permission To Participate (to be filled out by a parent)

Name: _____

Address: _____

Phone: _____

I give my child(ren) named above permission to participate in the “Week of Service” event, to be held on May 5 – May 9, 2008, during the days noted above.

Current Medical Conditions *(if form is for more than one child, identify conditions on a per child basis)*

In case of an emergency, please contact _____

Phone number of emergency contact _____

Parent’s Signature _____ Date _____