Sleep Out Saturday for the homeless

BRIDGE COMMUNITIES

one night

Help DuPage County Homeless Families

Sleep Out Saturday, November 4th at St. Philip the Apostle

1. Sign up to Sleep Out! Call ***Nancy – 630-543-1754***
2. Collect contributions or pledge to sponsor sleepers
3. Donate and get donations on-line at www.sleepoutsaturday.org
4. Attend the SOS Rally at 6:30 PM
   505 Crescent Blvd, Glen Ellyn – transportation provided
5. Learn more about this unique, fun, educational, community service event!

www.sleepoutsaturday.org

For more information on becoming a Sleep Out Saturday sponsor or sleep out site, contact Chad Pedigo at the Bridge Communities office at 630.545.0610, ext 19 or email chad.pedigo@bridgecommunities.org

Where will you be sleeping on November 4th?

October 1, 2017

Dear Friend,

Where will you be sleeping tonight?

You and I already know that the answer to that question.

But for homeless families in DuPage County, every night brings a different reply.

As part of my service work for Confirmation, I will be sleeping outside on Saturday, November 4th to raise awareness and funds for Bridge Communities, an organization that serves homeless families living in DuPage County.

Here's how you can help…

Every $35 you contribute pays for one night and a full day of services for a homeless family member.

Right now, Bridge Communities and their program partners are working to connect over 100 homeless families to living independently, succeeding at work and at school and feeling the freedom that comes with owning their own home.

How many nights can you give?

Think about it and donate online at https://www.bridgecommunities.org/group61 or give a cash or check donation made payable to Bridge Communities to me to hand deliver on November 4th.

Thanks for giving the gift of shelter, hope and independence.

Your friend,

PS: Here's some additional information about Bridge Communities…(over)

Bridge Communities' network includes program partnerships with 45 churches and community groups in locations throughout DuPage County.

Program partners assist in supporting over 100 homeless families in the Bridge Transitional Housing program.

With a four-star rating from www.charitynavigator.org, Bridge Communities is one of the top-ranked organizations to serve homeless families in the nation.

One gift to Bridge Communities goes to work on six levels providing housing, mentoring, tutoring, employment counseling, career and financial planning assistance.

For more information about Bridge Communities visit www.bridgecommunities.org or call (630) 545-0610.

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On **November 4th the St. Philip the Apostle** family will become 'homeless' for one night to raise awareness and support for homeless families in DuPage County by participating in **Sleep Out Saturday**.

Last year, this initiative organized by The Bridge Communities (www.bridgecommunities.org) raised over $120,000 to benefit homeless families in DuPage County. More than 1,500 persons participated by "Sleeping Out" at more than 60 sites throughout DuPage County.

This year, the **St. Philip the Apostle** family will join dozens of other DuPage County churches and civic organizations to raise dollars and awareness of the growing problem of homelessness in the western suburbs.

Though it can be hard to understand how homelessness can be a significant problem in an area as blessed as ours, unfortunately, the numbers don't lie. In DuPage County alone, 13,143 children live in poverty. Children under the age of 5 are the fastest growing segment. Over 15% of the homeless in DuPage County are victims of domestic violence. It costs about $1100 a month to rent a 2-bedroom apartment in DuPage County. A parent would need to work 110 hours per week at a minimum wage job to be able to afford this rent.

At Sleep Out Saturday, our **St. Philip the Apostle** families can really make a difference – while mixing fun, food and worship together in a great evening for a worthwhile cause.

There are many ways you and your family can take part:

- You and your family can sleep out on the **St. Philip the Apostle** grounds on Saturday night, November 4th .
- Make a donation of $35 or more to support the effort.
- Volunteer for the night to chaperone, cook breakfast, or be on medical call.
- There's a light breakfast at 6:00 am and a Sunday Mass planned so that you can attend and pray with our young people and their families.
- Collect donations after the 9:30 and 11:30 Masses on Sunday.

Most of all, I hope that you will feel moved to have a family dinner discussion about homelessness and the tremendous blessings we enjoy. One way to approach this with younger children is to talk about the differences between 'needs' and 'wants' and to talk about the basic needs we all have of food, clothing and shelter and the 'nice-to-have' things such as candy. With older children, you might consider a discussion about the impact on kids (their schoolwork, self-esteem, etc.) when their families don't have a safe place to sleep.

We as **St. Philip the Apostle** families really **can** do something positive about homelessness. Your family's awareness and participation can make a real difference in the lives of our neighbors right here in DuPage County.

Please contact the **St. Philip the Apostle** Religious Education Office for more details and to register your family.

Nancy McKnight, Director of Religious Education

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St. Philip the Apostle
Sleep Out Saturday
November 4, 2017

Thank You for Participating!

4:30 – 5:30 PM	Registration and box/tent set up.
6:00	Bus Leaves for Rally
8:30	Bus returns from Rally
9:00	Soup & Bread Dinner
10:00	Night Prayer
11:00 PM	LIGHTS OUT – GOOD NIGHT – STAY WARM
6:00 AM	Wake Up
6:30	Breakfast
7:15	In Narthex to greet Parishioners
7:30	Mass
8:15	Good Bye – Have a GREAT DAY!

Rules: A decision will be made at 9:00 PM Saturday regarding the weather. If it is too wet – or storms are predicted for the night, we will sleep in the Gym.

Inside:
Girls will sleep in tents/ boxes along the stage area. Boys will sleep in tents/boxes along the bleachers. Families will sleep in tents/boxes in the middle.

Outside:
Tents/boxes will be set up around the large tree outside of Door 11 – The Gym.

If you enter the building to use the restroom, you must sign in and sign out with the time. You may not be inside more than 10 minutes.
General Rules:

No member of the opposite sex may visit, socialize or sleep in your tent/box – unless it is a parent or sibling.

No one is allowed to leave the grounds for any reason – unless a parent comes to pick you up and sign you out.

Cell phones must be silenced and not used (unless there is an emergency) for the duration of the event.

During free time, you may play cards, board games, or play a guitar. You may not play video games, listen to music on iPods, iPads, phones or use any other electronic device.

You may bring snacks if you need them for health reasons. DO NOT bring s'mores, hot dogs, or anything else that has to be cooked. The camp fire will NOT be a grill. Limit snacks to granola bars and water if possible.

What to Bring:

PERMISSION SLIP
DONATIONS TO BRIDGE COMMUNITIES
Tent or Box to sleep in
Sleeping bag/pillow & tarp for the ground
Warm clothes: hat, gloves, heavy coat, boots, warm pants, sweatshirt
Playing cards or board games
Guitar to play for sing along
Hairbrush
Toothbrush/toothpaste
Snack

SLEEP OUT SATURDAY PERMISSION FORM

I request that my child, _____, be allowed to participate in the Sleep Out Saturday event, located at St. Philip the Apostle on Saturday, November 4, 2017.

I hereby release and indemnify my parish, ***St. Philip the Apostle Parish***, Addison, Illinois, its staff, volunteers, and the ***ANY AFFILIATED ORGANIZATIONS*** from any and all liability arising from claims of any kind or nature whatsoever from my child's participation in this event.

Videotaping and Still Photographs

Video and still photographs may be taken during this event. This authorization form constitutes permission for my child's participation in the videotape and/or still photographs, which may be used for future promotional efforts, including the Diocese of Joliet website.

Code of Behavior

You are representing ***Youth Ministry*** in our diocese during this event and we expect you will represent us well. We expect that you will display mature and responsible behavior, which for many years has been the trademark of Catholic youth and adults of our diocese.

Some Expectations:

1. All participants are expected to arrive on time.
2. All participants are expected to demonstrate common courtesy and respect at all times. Inappropriate language/behavior will not be tolerated.
3. Socializing should always be done in public areas.
4. Dress should reflect the value of modesty. Writing on clothing should reflect Christian values.
5. The possession or consumption of any alcoholic beverage and/or possession/use of any illegal drug is not permitted.
6. Smoking is not permitted.
7. Weapons and/or drug paraphernalia are not allowed.
8. If under the age of 18, prescription drugs need to be given to an adult from your parish for storage and distribution.
9. Infraction of these rules can mean immediate dismissal with no refund. Participants will be responsible to local authorities as well.

I understand and agree to this Code of Behavior. I also understand and agree that at the time of an infraction requiring my dismissal, I am responsible for my removal from the premises and any costs involved.

If under the age of 18, I also understand and agree that my parents or guardian will be notified at the time of an infraction requiring my dismissal. My parents or guardian win be responsible for my removal from the premises and any costs involved.

Youth Signature: _____ Date: _____

Parent/Guardian Signature: _____
Date: _____

Parent/Guardian Signature: _____
Date: _____

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MEDICAL PERMISSION FORM

I grant permission for the administration of First Aid to my child, _____, by the people in charge of the _____ event, and those transporting my child to and from the event as their judgment deems advisable, and to make the necessary referrals to qualified physicians for treatment of illness or accidents of a more serious nature. I understand I will be promptly notified in the event of any serious illness or accident and prior to any major surgery, except when delay in such communication would endanger life. In case of medical emergency, I understand that every effort will be made to contact the parent/guardian of the participant. In the event that I cannot be reached, I hereby give permission to the physicians selected by the adult staff to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery, if deemed necessary for my child.

Print Name: _____ (youth) Birth Date: _____

Allergic to medication/other? NO _____ YES _____

If yes, please describe: _____

Medication(s) presently taking: _____

Insurance Information

Policy in the name of: _____

Insurance Company: _____

Policy Number: _____

Identification Number and/or Social Security Number: _____

Authorized Physician: _____ Phone: (___) _____

Signature of Parent/Guardian _____ Date: _____

Address: _____
Street City State Zip

Day Phone: (___) _____ Evening: (___)

In Case of Emergency, contact: _____

Phone #'s: _____

_____

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