****  **St. Joseph Regional School**

**Rising Stars/Destination Imagination**

**2020-2021 Permission Form**

**Rising Stars**® is a non-competitive, team-building activity for students in Pre-K through grade 2 that fosters creative thinking and problem solving by having teams of students generate solutions to open-ended prompts. To participate fully, students should expect to participate in regular meetings with the rest of the team, in preparation for completion of their Rising Stars Challenge (Blast Off). **The team may elect to participate** in an optional tournament (which might be virtual) Saturday, March 20th, 2021, at Monadnock Regional Middle High School, where they can present their original skit to appraisers and participate in an Instant Challenge activity. Team meetings will generally occur every other week after school. Dates will be determined by team managers. More information can be found at <https://nh-di.org/> or <https://www.destinationimagination.org>.

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I grant permission for my student to participate in the St. Joseph Regional School Rising Stars Team, during the 2020-2021 school year.

Registration Fee: $75 per child

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthday\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_ Grade \_\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name Printed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Town of Residence\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pick – Up preferences** (*check all that apply*):

I will pick up my child directly from meetings.

I will let Child Care know my child will be attending after meetings.

**Volunteering** (*check all that apply*):

Yes, I am willing to be a team manager or co-team manager for a team (training is available).

Yes, I have taken the “Shield the Vulnerable” workshop to volunteer at SJRS.

Yes, I am interested in helping the Team Manager(s)

o Providing snacks for the team (we’d like to rotate this task around the families)

o Helping out the Team Managers during the meetings

o Providing materials for team props, costumes, etc.

Yes, I am willing to volunteer at the DI meet(s) to

o Serve as an appraiser

o Serve as a 2-hour volunteer

o Help run a SJRS concession stand

**Students:** Please bring this form, signed, with you to your teacher by **Thursday, October 28, 2020**.

**Parents:** We will need adult volunteers to meet the student desire for teams – THIS IS IMPORTANT!!

***Destination Imagination is completely run by volunteers.***

More volunteers = More teams = More involvement for our kids

 **St. Joseph Regional School**

**Elementary/Middle School Student**

**2020-2021 Permission Form**

Destination Imagination is a team-building activity that fosters creative thinking and problem solving by having teams of students generate solutions to open-ended prompts. To participate fully, students should expect to participate in regular meetings with the rest of the team (perhaps virtually), in preparation for completion of their Team Challenge**. The team will participate** in a regional tournament an optional tournament (which might be virtual) Saturday, March 20th, 2021, at Monadnock Regional Middle High School, where they can present their original skit to appraisers and participate in an Instant Challenge activity. Team meetings will occur at a time and place agreed upon by the team with the Team Manager(s).

More information can be found at <https://www.destinationimagination.org> or <https://nh-di.org/>.

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I grant permission for my student to participate in a St. Joseph Regional School Destination Imagination Team, during the 2020-2021 school year.

Registration Fee: $75 per child

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Birthday\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_ Grade \_\_\_\_\_\_

Team Challenge Preference \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IMPORTANT: Have you identified teammates or a Team Manager (coach)? If so, whom?

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Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name Printed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Town of Residence\_\_\_\_\_\_\_\_\_\_\_\_\_

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o Serve as a 2-hour volunteer

o Serve as an appraiser

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