

THURSDAY FLYER

From the Principal's Pen:

Dear St. Gerard Families;

We are slowly getting back into the routine of the school day. The first week of school can be full of excitement for some and stressful for others. We are here to work together with you to make your child's school experiences the best it can possibly be. Remember the old saying, "It takes a village to raise a child?" Well, it truly does and it is our goal to work together with you. In order to do this effectively we need to remember that communication is the key. Every single staff member at St. Gerard is here because they love the kids and the mission of Catholic Education.

Communication is the key. If you ever have any questions or concerns about the school day, please reach out to your child's teacher through Class Dojo or call the school office to leave a message and they will call you back within 24 hours. Remember our teachers are busy teaching your kids during the school day, so they might not be able to respond to a Dojo message until after school has concluded for the day. Every Thursday you will receive our school newsletter, Thursday Thoughts. This will include quite a bit of information including sign ups for sports and activities. Many of the classroom teachers will also post a classroom specific newsletter on Class Dojo.

I would also like to invite you to visit the school website. The lunch menu calendars and events/activities calendars can be found at sgslima.org. Staff email addresses can be found there as well. We will also be updating staff pictures and contact information on the website in the very near future.

We are looking forward to a great school year! Let's work together to make these kids the best faith-filled citizens that they can possibly be.

Have a great weekend!

Many Blessings,

Mrs. Natalie Schoonover, Principal

Edchoice Scholarship Acceptance Forms:

If you have not yet received an Edchoice Scholarship Acceptance form in the mail from the Ohio Department of Education, please make sure to check your email for updates from the Ohio Department of Education. If they need additional information about your child's scholarship application, the Ohio Department of Education will email you.

If you have not yet signed and returned your Edchoice Scholarship Acceptance forms to the school office, please do so as soon as possible. Thank you for your cooperation!!

New School Year Forms:

Please take a moment to complete the new school year forms that were sent home last week and return to the school office.

This paperwork is very important as one (1) of the forms is the emergency medical form which instructs the school on what to do if your child is ill or injured at school. The emergency medical form is attached or can be completed online at

<https://form.jotform.com/202119409051041>

If you have any questions, please contact the office.

St. Gerard Uniform Fleece Orders:

Enclosed is the St. Gerard Uniform Fleece Order form. Orders and money/checks are due by Thursday, September 1st. Please make checks payable to St. Gerard School.

Progressbook Parent Registration Keys:

St. Gerard School is proud to use Progressbook for parents to access their student's grades (3rd-8th grade students). Registration codes and directions were sent home earlier this week with your students. If you have any questions or need any additional assistance accessing your child's grades, please feel free to contact Mrs. Truex in the school office.

Extended Day Donations:

Extended Day is looking for gently used toys for the kids to play with after school. We are requesting no Legos. If you have any donations, please drop off to the school office. Thank you in advance for your donations!

St. Gerard Home & School Meeting:

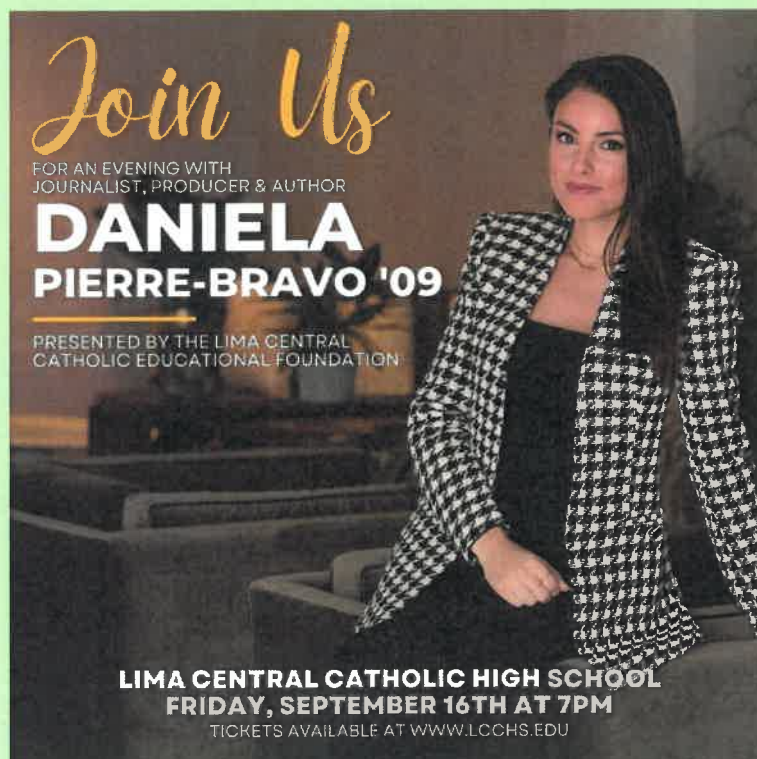
The St. Gerard Home & School is a parent group who plans fun events and supports our students and teacher throughout the school year. Some events that are currently being planned include Trunk or Treat/Family Bingo Night, Parent Teacher Conference Dinner, Fall Scholastic Book Fair, and Christmas Craft/Cookie Decorating. Our next meeting is on September 12th at 6 p.m. in the school cafeteria. All are welcome!



St. Gerard School is hosting our 8th annual designer purse bingo on Saturday, October 15, 2022 at 7 p.m. in the Gym. Tickets are now on sale in the school office for \$40 per person. Tickets include 20 games of bingo with a designer purse as the prize and a light dinner. 50/50 and auction baskets will be available for purchase. Grab your family and friends for a great evening while meeting other school families!

Purse Bingo Donations:

St. Gerard School's Purse Bingo is a major fundraiser for the school and we are in need of assistance from all of our school families. We have auction baskets available the night of the event. We are requesting each student to donate \$10 towards items that we can purchase for the auction baskets. Please submit the money to the office or your child's homeroom teachers by Friday, September 9th.



SEPTEMBER | 2022



Lunch Menus

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

29

Coney Dog
Potato Wedges
Carrots
Peaches
Milk

30

Popcorn Chicken
Mash Potato/Gravy
Corn
Dinner Roll
Applesauce
Milk

31

Pizza
Romaine Salad / Dressing
Bread Stick
Pears
Milk

1

Grilled Cheese / Pretzel Bun
Baked Beans
Carrots
Fresh Fruit
Milk

2

BBQ Pork / Bun
Tater Tots
Green Beans
Mandarin Oranges
Milk

5

**Labor Day
No School**

6

Chicken Parmesan / Bun
French fries
Carrots
Applesauce
Milk

7

Pizza
Romaine Salad/ Dressing
Bread Stick
Pears
Milk

8

Corn Dogs
Baked Beans
Broccoli
Fresh Fruit
Milk

9

Hamburger / Bun
French Fries
Carrots
Mandarin Oranges
Milk

12

Salisbury Steak
Mash Potato / Gravy
Corn
Dinner Roll
Peaches
Milk

13

Chicken Nuggets
Green Beans
Carrots
Dinner Roll
Applesauce
Milk

14

Pizza
Romaine Salad / Dressing
Bread Stick
Pears
Milk

15

Pancake on a Stick
Potato Triangles
Carrots
Fresh Fruit
Milk

16

Hot Dogs / Bun
Baked Beans
Carrots
Mandarin Oranges
Milk

19

Sloppy Joe / Bun
Chips
Carrots
Peaches
Milk
cookie

20

Boneless Chicken wings
Baked Beans
Green Beans
Dinner Roll
Applesauce
Milk

21

Pizza
Romaine Salad / Dressing
Bread Stick
Pears
Milk
Vanilla Pudding

22

Sausage
French Toast
Hash Brown
Fresh Fruit
Milk
Ice Cream

23

Chicken Drumstick
Mash Potato / Gravy
Dinner Roll
Carrots
Mandarin Oranges
Milk

26

Macaroni and Cheese
Green Beans
Dinner Roll
Peaches
Milk

27

Chicken Patty / Bun
Tater Tots
Carrots
Applesauce
Milk

28

Pizza
Romaine Salad / Dressing
Bread Stick
Pears
Milk

29

Chicken Strips
French Fries
Carrots
Fresh Fruit
Milk

30

Tacos
Refried Beans
Lettuce, Tomato, salsa
Cheese
Mandarin Oranges
Milk

News

Menus are Subject to change.

Extras will be available at a cost of \$1.50. Students need to have a signed permission slip to purchase extras. Extras are not free to Free and Reduced students they will need to pay for them like everyone else

This Institution is an Equal Opportunity Provider.

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|-------------|
| ROOM _____ |
| GRADE _____ |

DATE _____

2022-2023 EMERGENCY MEDICAL AUTHORIZATION FORM

School _____ Student Name _____
 Student Birthdate _____ Address _____

 Telephone _____

Purpose – to enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured while under school authority, when parents or guardians cannot be reached.

Residential parent or Guardian:

Mother's Name _____ Daytime Phone _____
 First Last Cell Phone _____

Mother's Employer _____ Phone _____

Father's Name _____ Daytime Phone _____
 First Last Cell Phone _____

Father's Employer _____ Phone _____

Other's Name _____ Daytime Phone _____

Name of relative or Childcare Provider:

_____ Relationship _____

Address _____ Daytime Phone _____
 _____ Zip _____

I give permission for School Personnel to administer Tylenol at school. _____ Yes _____ No

I give permission for School Personnel to administer Tums at school. _____ Yes _____ No

| |
|--|
| <p>In the Event of an emergency early dismissal my child should:</p> <p>_____ Ride the bus</p> <p>_____ Wait to be picked up</p> |
|--|

**PART I OR II MUST BE COMPLETED
 (See Reverse Side)**

PART I: TO GRANT CONSENT (The separate authorization to Administer Medication or Carry Inhaler form must be completed if applicable.)

I hereby give consent for the following medical care providers and local hospital to called:

Physician _____ Phone _____

Dentist _____ Phone _____

Medical Specialist _____ Phone _____

Local Hospital _____ Emergency Room Phone _____

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) the administration of any treatment deemed necessary by above name doctors, or, in the event the designated preferred practitioner is not available, by another licensed physician or dentist; and (1) the transfer of the child to any hospital reasonable accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery are obtained prior to the performance of such surgery.

Facts concerning the child's medical history, including allergies, medications being taken, and any physical impairments to which a physician should be alerted:

Date _____ Signature of Parent/Guardian _____

Address _____

Zip _____

PART II: REFUSAL TO CONSENT

I do NOT give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take the following action:

Date _____ Signature of Parent/Guardian _____

Address _____

Zip _____

**Lima Family YMCA
FALL SOCCER LEAGUE
For Boys and Girls
Ages 4 to 4th Grade
No Tryouts! Just Sign Up!**



PROGRAM SCHEDULE:

Registration Dates: August 1 to September 8, (after 9/8 until teams fill)
Coaches Meeting: Thursday, September 8, 2022 7:00 pm (YMCA)
Games Begin: Week of September 19 to October 22, 2022
Game Times: 4 & 5 yr. olds & K – Wednesdays (5:15 or 6:15) and Saturdays (9:30a or 10:30a)
Games played on a 6 vs 6 format on a small field with only out of bounds and smaller nets.
1st & 2nd Grade – Wednesdays (5:15 or 6:15) and Saturdays (9:30a or 10:30a)
3rd & 4th Grade – Tuesdays & Thursdays 5:15 or 6:15

Program fee: \$25 Member (w/ membership card)
Early Bird Special \$50 for non-member
(Register before 9/5)

After September 5 \$30 Member / \$60 Non-Member
All registrations must go to the YMCA Fee includes T-shirt, socks and award

For more information call Orion Monford at 419-223-6045 Ext 114.

MAIL To:

**Attn: Orion Monford
Lima Family YMCA
345 S. Elizabeth Street
Lima, Ohio 45801**

**On line @ www.limaymca.net til 9/4
Or Register @ Y's Front Desk**

MISSION:

**Everybody Plays Safety First
Fair Play Sport For All
Family Involvement Sport For Fun
Positive Competition**

YMCA Fall Soccer Registration 2022

PARENTS: You are an important part of our program as well as your children. We need you to help us coach and encourage these youngsters in the development of their skills. Please take an active role with your child by volunteering a couple of hours a week to this program. We will instruct you in all areas in which you might be interested. Please check the box below if you can help us in this program. Coaches may be subjected to a background check. **THANKS.**

Coach _____ Assistant _____ Coach's Shirt Size _____

Player's name _____ Telephone # _____

Parents' name _____ Parents Birth Date _____

Address _____ Zip _____ School _____

Age _____ Grade _____ Date of Birth _____ Sex: Male _____ Female _____

2nd Emergency contact _____ Telephone # _____

YMCA Member _____ Non-Member _____ Shirt size: Youth – S/8 M10/12 L14/16 Adult – S M L XL

E-mail address _____ Last season coach _____

FOR PARENT OR GUARDIAN: I hereby certify that a physician has properly screened the above named child, there are no medical conditions and he/she is capable of participating safely in the YMCA soccer program. I do hereby release and discharge the Lima Family YMCA and volunteers from all claims to damages, demands and actions, whatsoever in any matter arising from this athletic program. I have read and understand the mission of this Youth Soccer program and hereby grant permission for the above named to participate.

Date _____

Signature of Parent/Guardian