



Dear Parent/Guardian

We intend to take a joint group from Dundrum Methodist Church/Wesley College to Autumn Soul. This is an event run by the Methodist Church's Department of Youth and Children's work. Autumn Soul is a weekend of worship and teaching. There will also be seminars, workshops, dodgeball tournament, late night extras and lots of fun. (NB. Your child does not need to be a Methodist, or a student at Wesley to attend - we are just combining the groups for ease of organisation/transport)

**Date:**  
27th - 29th October 2023  
Leave Wesley College @2:30pm Friday  
Return Wesley College Aprox @4pm Sunday

**Venue:**  
Bangor, N.Ireland

**Speaker:**  
Richard Oppong-Boateng

**Age Group:**  
Secondary School

- Bring:**
- Sleeping Bag and Pillow (DO NOT FORGET)
  - Roll Mat/Air Bed (sleeping on hall floors)
  - Enough clothes for a weekend + warm clothes
  - Waterproof Coat
  - Bible, Notebook, Pen
  - Money (sterling) for Friday & Saturday night meal + a little euro for a pit stop on the way up
  - Medication if required.
  - Further information can be found on <https://irishmethodist.org/imyc-autumn-soul>

The cost of the weekend will be €50 + €12 (travel) pp. All meals at the weekend are provided except Friday & Saturday evening where the group will have to buy their own (bring sterling)

To attend please fill in the attached consent form return it to Andrew Mullen or Rev Mackey and please fill in the online consent form. If you require any more information do not hesitate to contact us. The emergency contact numbers for the weekend are **0877993195 (Nigel)** or **0863616396 (Andrew)**. Cheques made payable to "Dundrum Methodist". If you desire to pay via Bank Transfer please contact Andrew

**Please detach and return**

I note the arrangements and give permission for my child ..... to attend Autumn Soul 2023

Please indicate details of any known medical conditions, allergies, special needs or requirements:

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In the event of illness or accident, having parental responsibility for the above named child, I give permission for first aid to be administered where considered necessary by a trained first aider, if available, or medical treatment to be administered by a suitably qualified medical practitioner.

If I cannot be contacted and my child should require emergency hospital treatment, I authorise an adult leader to sign on my behalf any written form of consent required by the hospital. However, I understand that every effort will be made to contact me as soon as possible.

Signed: ..... Relationship to Child:.....

Contact Telephone Numbers: Home:..... Mobile :.....