

SCQM QUARTERLY REPORT

SOUTHERN CALIFORNIA QUARTERLY MEETING
of the
RELIGIOUS SOCIETY OF FRIENDS
Spring 2011



CALL TO QUARTERLY MEETING SPRING GATHERING



Saturday 30 April 2011, 9:00 AM – 4:30 PM

Hosted by San Diego Monthly Meeting; 3850 Westgate Pl.; San Diego, CA 92105

Please join us for a day of worship, fellowship, and fun as we seek the spirit together.

Under the care of Ministry and Counsel, we will be continuing to get to know one another through Worship Sharing around our State of the Meeting Reports. This sharing is one way we can experience growth from our monthly meetings' joys and trials and gain insights for the coming year. For those of us listening to all of these reports, it informs a broader perspective of what meetings other than our own are experiencing, both accomplishments and struggles, fears and hopes. And in that light, we can offer help across the quarter and take heart that our own struggles can be overcome, given what other meetings have gone through.

It'll involve some travel for most of us, to get to San Diego Meeting, but that's balanced by the opportunity to see what San Diego Friends have in the way of a new meetinghouse. This meetinghouse, which just experienced its grand opening in March, is a work of love and faith. The building is shared among San Diego Meeting, AFSC Border Program & San Diego Peace Resource Center. It has been designed and built with a huge amount of volunteer labor and is very beautiful.

Membership in a Monthly Meeting assumes support and participation and we need that same commitment to Quarterly Meeting. Given the demands on our lives we often have little choice in our priorities – we must after all earn a living and care for our household. And earning a living these days has become very demanding indeed for most of us. So we find ourselves hoping that the things we value, like Fall Fellowship, will happen. We have been going to Temescal Canyon, for 42 years, but due to lack of a SC Quarterly Arrangements committee, we may have to lay down Fall Fellowship. Granted, just because we've done something for a long time doesn't mean we always have to do it, and perhaps it's time to reconsider that. So if you enjoy and value the Fall Fellowship, please come and take part in the discussion on April 30th at San Diego Friends' Meeting.

There will also be stimulating fellowship, learning more about our SCQM Committees and of course our wonderful teen and children's programs. If you are new to your Meeting or quarterly Meeting, or just have not yet been to Spring Gathering, please consider this a personal invitation to join F/friends.

**We will see you on April 30th in San Diego!
John Sisson and Dan Strickland, Co-clerks**

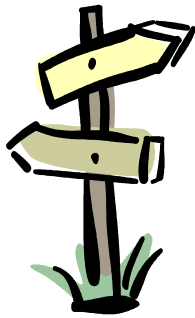
Southern California Quarterly Meeting
MEETING FOR BUSINESS
30 April 2011 - San Diego Meetinghouse

9:00 - 9:30 Settling in
 9:30-10:00 Opening worship
 10:00-11:15 Plenary I: Worship Sharing Around State of The Meeting Reports (Part 1)
 11:15-11:30 Break
 11:30-12:30 Plenary II Business
 12:30- 1:30 Lunch and Tour of SD Meetinghouse
 1:30- 2:45 Plenary III: Worship Sharing Around State of The Meeting Reports (Part 2)
 2:45-3:00 Break
 3:00-4:00 Plenary IV Business
 4:00-4:30 Closing Worship

San Diego
Meeting

3850 Westgate Place
 San Diego, CA 92105
 (619) 687-5474
 via Mapquest at:

<http://scqm.org/sd.html>



DRIVING TIP:

Watch for "CHURCH OF THE
 BRETHEREN" directional signs

Food: Vegetarian meals will be offered for
 lunch at \$7 per person.

State of the Meeting Reports

State of the Meeting Reports – Sharing Sessions

Want to gain some perspective on the way your Meeting responds to the challenges it faces? If so, please join us for our annual presentation and prayerful consideration of State of the Meeting reports from around the Quarter. Explore with others how Meetings are endeavoring to open the way for Spirit to move among us.

(For those preparing the reports, remember that they should be emailed to **Michael Dunn**

(michael.dunn@ucr.edu) no later than April 15.)

QUAKER ADVENTURES: THE TEEN PROGRAM

This Spring Quarter offers Junior and Senior High School youth **THREE POSSIBLE ADVENTURES PLUS TIME TO HANG WITH NEW AND CURRENT FRIENDS!!!** We will gather with the adults for morning refreshments at San Diego Monthly Meeting April 30th. SDMM has invited us to spend the night in the new San Diego Friends Center. A tour of this amazing "green" building, including details of construction, will be arranged. (Both the story and the end product are beautiful and inspiring! We will sleep over in its Children's Room and it's Apartment. Both have bathrooms, and showers are available. Sleeping areas will be divided by sexes and Friendly Adult Presences will be sleeping with each group.

A service project, to be determined, has been offered. We will not need to leave the site.

A tour of the border, conducted by the AFSC Border Program staff, has been offered. This will include a guided tour of the fence which divides the USA and Mexico. AFSC will provide a van. **We will not cross the border.** Knowledgeable AFSC staff will discuss immigration issues with us.

WHAT TO BRING: SLEEPING BAG, SOMETHING SOFT TO PUT UNDER IT, (THE FLOORS ARE CEMENT), PILLOW, TOWEL, TOILETRIES, a favorite game, cards. music, instruments, sunscreen, jacket, work clothes and shoes, a favorite snack to share with everyone,

REQUIRED - FILLED OUT: 1. MEDICAL HISTORY/INFORMATION FORM; 2. A COPY OF MINORS HEALTH INSURANCE CARD; 3. PARENTAL CONSENT FORM FOR MINORS. COPIES OF THESE FORMS ARE AVAILABLE IN THIS QUARTERLY REPORT, OR AT: <http://scqm.org>

COSTS: THERE IS NO COST FOR THIS PROGRAM, EXCEPT THAT OF A LUNCH CONTRIBUTION TO SDMM FOR LUNCH ON SATURDAY.

HOWEVER YOU MUST REGISTER BY CALLING JEANETTE NORTON, 949-551-8070, OR 714-915-8070, OR BY EMAILING HER AT: lightseeker@cox.net ASAP, but no later than Sat. April 23rd. I need to know the names of participants to reserve the AFSC staff and van.

Call Jeanette Norton, Clerk of Quaker Adventures, if you have questions, problems or would like to help plan the weekend program with our QA Committee of adults and teens.

We look forward to seeing you.

Hospitality

If you need hospitality the night before or the night of April 30th let Sue Scott know ASAP at sescott4@verizon.net

Include allergies and type of sleeping arrangements you need or can bring.

We look forward to seeing you all there!

Thanks, Sue Scott Clerk, Arrangements Committee
sescott4@verizon.net

A Note About the Children's Program:

The SCQM Religious Education Committee will be providing childcare and a children's program, "*Where in the World is . . . ?*"

If you are planning to attend and have children (birth to twelve) who would like to participate in the children's program, please contact Robin DuRant, 323-344-0228.

(Also provide a copy of your Medical Insurance Card(s), front and back, and complete the **Medical Release and Field Trip Permission Form for Youth** enclosed in this newsletter for each child and give to program staff upon arrival).

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QUAKER ADVENTURES AND CHILDREN'S PROGRAM MEDICAL HISTORY & INFORMATION

One form per minor. This form *and* the Parental Consent for Minors form must be turned in before your minor may attend any SCQM children's or teens' program.

MINOR'S NAME: _____ **BIRTHDATE** _____ **AGE** _____

Medications, dosage and schedule _____

Are there serious consequences if meds are skipped? _____

Other information (medical / physical / emotional issues) [use additional sheet(s) if necessary]

MEDICAL HISTORY/CONCERNS

Date of last tetanus shot _____

Allergies _____

Minor's doctor _____ Telephone _____

Insurance company _____

Policy holder's name _____ Policy # _____

If an HMO, please give name and telephone # _____

PARENTS' OR GUARDIANS' EMERGENCY NUMBERS DURING EVENT:

Mother / legal guardian's name _____

Telephone _____ Cell phone _____

Father / legal guardian's name _____

Telephone _____ Cell phone _____

IN THE EVENT THAT PARENT / LEGAL GUARDIAN CANNOT BE CONTACTED, CALL:

Name _____ Relationship _____

Telephone _____ Cell phone _____

**PLEASE NOTE: Please enclose a photocopy of minor's Health Insurance card.
This form must be completed for each minor and for each event**

Date completed _____ By _____

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Parental Consent for Minors (age 17 and under)

One form per minor. This form *and* the Medical History & Information form must be turned in before your minor may attend any SCQM children's or teens' program.

Permission to Attend

I/We, the undersigned parent(s) or person having legal custody/guardianship of _____, a minor, give permission for this minor to attend the children's programs and/or Quaker Adventures of SCQM of the Religious Society of Friends.

Authorization for Third Party Consent to Medical Treatment of Minor Lacking Capacity to Consent

I/We, the undersigned parent(s) or person having legal custody/guardianship of _____, a minor, do hereby authorize any personnel or any staff person(s) or volunteers of SCQM of the Religious Society of Friends, as agent(s) for the undersigned to consent to any X-ray examination, anaesthetic, medical or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the Medical Practice Act on the medical staff of any hospital, whether such authorization is given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority to the aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which a physician meeting the requirements of this authorization may, in the exercise of his/her best judgment, deem advisable. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. I/We hereby authorize any hospital which has provided treatment to the above-named minor pursuant to the provisions of Section 25.8 of the Civil Code of California to surrender physical custody of such minor to my/our above-named agent(s) upon the completion of treatment. This authorization is given pursuant to section 1283 of the Health and Safety Code of California.

Field Trip Permission

In addition, the above minor has my/our permission to participate in the program of SCQM of the Religious Society of Friends organized for his/her age group. This includes permission to go swimming and to go on field trips in buses or private cars. It is SCQM's policy that all passengers be seat-belted in street-legal vehicles and all drivers have appropriate automobile insurance.

Parents' and Sponsor's Signatures

These authorizations shall remain effective for the duration of this program, unless sooner revoked in writing. The undersigned agree to hold SCQM of the Religious Society of Friends and its officers, agents, teachers and other volunteers harmless of any claim by the undersigned arising out of any medical treatment given by or attempted in connection with any medical emergency.

Parent / Legal guardian / Person having legal custody (circle relationship)

Printed Name: _____ Signature: _____ Date: _____

Sponsorship Permission

If a parent/guardian is not going to be present for any or all of the time/dates that the child is present, that child must have a sponsoring adult present on site. If that is the case, then this portion must also be filled out.

I/We do hereby authorize the adult named below (SPONSOR) to sponsor the above-named minor during SCQM of the Religious Society of Friends Programs, when I/we will not be in attendance.

Printed Name: _____ Signature: _____ Date: _____

Sponsor

I will be attending the event described above at the same time as the above-named minor, and I agree to accept responsibility of sponsoring the minor.

Printed Name: _____ Signature: _____ Date: _____

Sponsor