

FCA Club

(Fellowship of Christian Athletes)

Vision

To see the world transformed by Jesus Christ through the influence of coaches and athletes.

Mission

To lead every coach and athlete into a growing relationship with Jesus Christ and His church.

Values

Our relationships will demonstrate steadfast commitment to Jesus Christ and His Word through Integrity, Serving, Teamwork and Excellence.

INTEGRITY (Proverbs 11:3)

We will demonstrate Christ-like wholeness, privately and publicly

.SERVING (John 13:1-17)

We will model Jesus' example of serving.

TEAMWORK (Philippians 2:1-4)

We will express our unity in Christ in all our relationships.

EXCELLENCE (Colossians 3:23-24)

We will honor and glorify God in all we do.

We seek to make disciples through our strategy of engaging, equipping and empowering coaches and athletes to know and grow in Christ and lead others to do the same.

ENGAGE (1 Thessalonians 2:8)

We engage coaches and athletes through genuine relationships sharing our lives and the Gospel.

EQUIP (Ephesians 4:12)

We equip coaches and athletes to grow in Christ through God's Word.

EMPOWER (2 Timothy 2:2)

We empower coaches and athletes to engage and equip others to know and grow in Christ

FCA is open for all students.

Club Sponsors:

Mrs. Beldon, Mrs. Breedlove, and Ms. Eiken

We will meet the 3rd Tuesdays of most months at 7:20 am

We will meet the 2nd Tuesday in November.

September 19th

October 17th

November 14th (second Tuesday)

January 16th

February 20th

March 19th



FCA Fellowship of Christian Athletes
Club Application

Student's Name _____

Teacher's Name _____

Parent(s) Names _____

Parent(s) Phone Number – Please list the best phone number for each parent/guardian.

Parent	Phone Number

Parent(s) Email (For reminders/changes) _____

General Release – Please read carefully.

This General Release (hereinafter the “Release”) made this _____ day of _____ by and among Gwinnett County, Georgia, (hereinafter the “County”) and _____ (Print parent’s name here) as parent or natural guardian (hereinafter the “Guardian”) of _____ (Child’s Name) as follows:

To participate in all FCA Club Events for the period of: September 2022- May 2023. I also understand good conduct is expected. I realize that failure to comply to club expectations could result in my child’s dismissal from the program at any time. * In case of severe weather, please check the news for school closing.

Parent/Guardian’s Signature

Parent’s Name (**Please print.**)