

Youth Ministry

Participant Registration Form 2013 - 2014

Participant Information

Name: _____

Date of Birth: _____ Shirt Size: _____

School: _____ Grade: _____

Address: _____

City: _____ State: AZ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Parent/ Guardian Information

Name: _____ Relationship to Participant: _____

Phone: _____ Email: _____

Emergency Contact Information

Name: _____ Relationship to Participant: _____

Phone: _____

Youth Ministry

Participant Registration Form

Participant Name: _____

Medical Release

I request that the above named participant be allowed to attend church related activities, events, trips and social service opportunities with Our Lady of Perpetual Help Catholic Church. In the event of an illness, I request that the designated catechist or coordinator of Parish Youth Ministry obtain medical treatment on my behalf for my student if I or the emergency contact cannot be reached. Prescription medication will be given in its original container with dosage information on it. I understand reasonable precautions will be taken to safeguard the health and well being of my teen and that I will be contacted immediately in case of emergency or accident. I understand this form will be kept on file and used for the entire fiscal year. I promise to update any information that changes throughout the year. I understand I will be asked to sign attendance forms for each event or trip. I will not hold Our Lady of Perpetual Help Catholic Church, the Diocese of Phoenix, the chaperone or Coordinator of Parish Youth Ministry responsible for accident or injury.

Behavior Agreement

My student named above will dress and act respectfully; use no verbal or physical abuse of self or others; will not have in their possession at anytime, alcohol, drugs or tobacco of any kind; will be responsible for their own belongings, will not leave the designated area at any time for any reason without contacting the adult in charge; and will review these guidelines with me prior to signing below. I understand that if the teen named above is involved in any illegal activity or serious destructive behavior that I will be contacted immediately and responsible for their immediate transportation home.

Photo and Video Release

I allow the student named above photo and video to be taken and used with proper discretion for use and promotion of the Youth Ministry.

Parent/Legal Guardian Signature: _____ Date: _____