

YOUTH MINISTRY PROGRAM REGISTRATION 2017/2018

The United Methodist Church of West Chester

Parent's Name(s) _____

Address _____

Home phone _____ Parent(s) cell phone _____

Parent's Email(s) _____

Child #1 Name _____

Date of Birth _____ Grade _____ School _____

Email (optional) _____

Allergies/other concerns _____

Register my child in the following (Please check all that may apply):

Sunday morning Confirmation/Bible Study/Sunday School (Grades 6-12)

Cross Connection Youth Choir for Grades 6-12

Sunday evening Youth Group for grades 6-12

Web Dance monthly ministry to special needs adults for grades 9-12

Wednesday Night Out Drop-In for grades 6-12

Child #2 Name _____

Date of Birth _____ Grade _____ School _____

Email (optional) _____

Allergies/other concerns _____

Register my child in the following (Please check all that may apply):

Sunday morning Confirmation/Bible Study/Sunday School (Grades 6-12)

Cross Connection Youth Choir for Grades 6-12

Sunday evening Youth Group for grades 6-12

Web Dance monthly ministry to special needs adults for grades 9-12

Wednesday Night Out Drop-In for grades 6-12

Child #3 Name _____

Date of Birth _____ Grade _____ School _____

Email (optional) _____

Allergies/other concerns _____

Register my child in the following (Please check all that may apply):

Sunday morning Confirmation/Bible Study/Sunday School (Grades 6-12)

Cross Connection Youth Choir for Grades 6-12

Sunday evening Youth Group for grades 6-12

Web Dance monthly ministry to special needs adults for grades 9-12

Wednesday Night Out Drop-In for grades 6-12

Child #4 Name _____

Date of Birth _____ Grade _____ School _____

Email (optional) _____

Allergies/other concerns _____

Register my child in the following (Please check all that may apply):

Sunday morning Confirmation/Bible Study/Sunday School (Grades 6-12)

Cross Connection Youth Choir for Grades 6-12

Sunday evening Youth Group for grades 6-12

Web Dance monthly ministry to special needs adults for grades 9-12

Wednesday Night Out Drop-In for grades 6-12

SAFE SANCTUARIES POLICY:

Safe Sanctuaries is an overt expression in making congregations safe places where children, youth and elders may experience the abiding love of God and fellowship within the community of faith.

As a part of our Safe Sanctuaries Policy, Youth will be asked to sign in at all youth programs and events and are not permitted to leave during any program or event early without signed written permission from a parent or legal guardian. During programs we will not grant participants permission to go to 7-11, Kiwi, Starbucks or anywhere else without parental consent. When we leave the building for special events youth will need to have a separate parent/guardian signed release form.

IMAGES PERMISSION

[] The United Methodist Church of West Chester has my permission to use images of my child(ren) in promotional, digital print, and web based materials or live streaming videos.

_____ Parent's Signature

[] I prefer that images of my child(ren) not be used in promotional, digital print, and web based materials or live streaming videos.

_____ Parent's Signature

Parent Participation: I will be willing to help with the following areas:

Sun. morning **Confirmation/Sunday School** Leader/Helper Sun. evening **Youth Group** Leader Sun. evening **Snack Supper** Meal Prep & Server

Monthly Sunday Night **Web Dance** Leader/Helper **Special Event/Service Project** Organizer/Helper