

Youth Registration



**Instant Messaging:* _____

Facebook: _____

SKYPE: _____

other: _____



s³Heep ministry
students, seeking & serving
HIM
everywhere, every day,
passionately

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2017

St. John Lutheran Church

Youth Registration Form

(Use one form per student please)

Note: My apologies for asking you to repeat information you have already given. If St. John would already have certain information on file (such as Baptism dates etc.) please do not bother finding again. However, our *Youth Assistant* software data base allows for some additional information and contact options. Thanks! - Matthew



Student Name: (*formal name*) _____ Preferred Name: _____

Address: _____ Age: _____ Birth Date: _____
_____ Grade: _____ Baptized: Y or N (if Y __/__/__)

Home Phone: _____ Cell Phone: _____ Email: _____

School / Club Activities: _____ Best way to contact you: _____

Hobbies: _____ School: _____

Allergies / Medical Conditions to be aware of: (Note: In order to be a part of *some St. John Youth* ministry activities a *Permission & Health* form will need to be filled out and signed by a parent or guardian. Thank you!)

Father's Name: _____ Mother's Name: _____

Address: (if different) _____ Address: (if different) _____

Home Phone: _____ Cell Phone: _____ Home Phone: _____ Cell Phone: _____

Email: _____ Email: _____

Employer: _____ Work Phone: _____ Employer: _____ Work Phone: _____

Emergency Contact (other than a parent): _____ Phone: _____

THANKS!