First Presbyterian Church Youth Ministries Registration & General Permission Form



Date_____

Name of Youth: Program Year: Youth Ministries Programs, August 2019-August 2020	
Child's Name*	Date of birth*
Parent Phone* Text Okay? Yes No	Alternate Phone(s) Text Okay? Yes No
Street address*	City / State / Zip*
Parent / guardian email	Youth email
Youth Cell Phone Text Okay? Yes No	Does this student have an IEP?
Insurance Co. & Details	Insurance phone
Grade / School	Dietary restrictions?*
Allergies?*	Any medications? For what?*
*Permission to use photos in church promotions (without use of student's full name)	YES NO
*Permission to be a passenger on the church bus or designated vehicle	YES NO

Parent / Guardian Signature_____

* Indicates required information