

Trinity Lutheran Church

2017-2018 Youth Education Registration

Sunday Worship

Worship 9:00am
Education Hour 10:15 – 11:15
 Sunday School: PreK – 5th Grade
 Pre-Confirmation: 6th & 7th grade
 Confirmation: 8th & 9th grade

Wednesdays

Worship 5:30
Meal 5:00 – 5:30
Confirmation 6:30 – 7:30

Calendars of the year will be sent home with students on the first day of classes and found on our website in the fall. Please submit your registration forms by September 6th, to ensure we have enough teachers and leaders. Confirmation Parent/Student Informational Meeting will take place August 27 for 8th & 9th grade at 10:30am.

Parents/Guardian:

Name(s): _____

E-mail: _____

Home Phone: _____ Cell Phone: _____ (texting? Y or N)

Home Address: _____

Alternative Contact: _____

Relationship to Youth: _____ Phone: _____

Additional Information: _____

Youth Name	Gender	Birthdate	Grade	They will be participating in...
Example: John Anderson	M	01/01/2000	12	Youth Devotions, Youth Group

Trinity Lutheran Church
Youth Permission and Medial Release Form
August 1st, 2017 – August 31st, 2018

Parent Participation:

Some things cannot happen without the help of our parents. Please sign up where you think you would be able to help out with our programming this year. Thank you for all you do!!

- | | |
|---|---|
| <input type="checkbox"/> Sunday School Teacher | <input type="checkbox"/> Chaperone or Driver on Youth Trips |
| <input type="checkbox"/> Sunday School Helper | <input type="checkbox"/> Donate Baked goods for Sunday |
| <input type="checkbox"/> Substitute Sunday School Teacher | <input type="checkbox"/> Coffee/Fellowship Hour |
| <input type="checkbox"/> Christmas Program Helper | <input type="checkbox"/> Help with Lent suppers |
| <input type="checkbox"/> Family Event Helper | |

Medical Release & Photography Permission

Insurance Policy:

Insurance Company: _____ Policy #: _____

Company Address: _____ Phone: _____

Policy Holder's Name: _____

Medical History

If your children have any known allergies, medical conditions, or other concerns that chaperones should be aware of, please list their names and conditions here:

Parental Contract:

By signing this permission slip, I give permission for my child to attend any Trinity Lutheran Church activities from August 1st, 2017 – August 31st, 2018. I give consent for Trinity Lutheran Church to photograph or record my child during events and my child's image may be posted on social media without their names or personal information. I understand all reasonable safety precautions will always be taken by Trinity Lutheran Church staff and volunteers during the events and activities. If I cannot be reached, this document gives permission to Trinity Lutheran Church, its staff, volunteers and supervisory personnel to act on my behalf in seeking emergency treatment for my child. I agree not to hold Trinity Lutheran Church, its leaders, employees and volunteer staff liable for damages, losses, diseases, or injuries incurred by the subject of this form. I furthermore give permission for my child to be transported to and from events by hired and volunteer drivers authorized by Trinity Lutheran Church.

Parental Signature: _____

Participant Contract:

I will conduct myself as a Christian in all youth events that are sponsored by Trinity Lutheran. By participating in a Christian fellowship, I will get to know fellow youth group members, find Jesus in my life and have fun along the way! I promise to obey the rules set by adult leaders and any other officials that may be involved. I understand if I fail to do so I will be sent home at MY expense. I am aware that my parents will be telephoned and informed of the incident.

Participant Signature: _____