

SouLFood@LittleFlower Youth Ministry
Parent Registration Form

Family Last Name: _____

A) Teen Name: _____ Teen's birthdate: _____
(first and last)

B) Teen Name: _____ Teen's birthdate: _____
(first and last)

C) Teen Name: _____ Teen's birthdate: _____
(first and last)

D) Teen Name: _____ Teen's birthdate: _____
(first and last)

Mother's name (or primary guardian A): _____

Mother's home phone: _____

Mother's cell: _____

Mother's email: _____

Father's name (or primary guardian B): _____

Father's home phone (if different from above): _____

Father's cell: _____

Father's email: _____

Emergency Contact (please list an individual other than those listed above):

Name: _____

Relationship to teen: _____

Phone number: _____

Do any of your children have any allergies or other medical conditions we should be aware of?

In the event of an emergency:

To which hospital should your child(ren) be taken? _____

Family Doctor: _____ Phone #: _____

Family Dentist: _____ Phone #: _____

Health Insurance Carrier: _____ Policy #: _____

Please initial one of the following:

I hereby grant permission for nonprescription medication (such as Tylenol or throat lozenges) to be given to my child, if deemed advisable.

No medication of any type whether prescription or nonprescription may be administered to my child unless emergency treatment is required.

Would you like to...? (check all that apply): *greatest needs are listed first

Be a member of our Prayer Team (those specifically committed to praying for the youth by name and praying for the ministry)

Help with active outreach to teens (sending cards, personally inviting teens to join ministry, etc.)

Help plan/execute fundraisers for mission trips (such as pancake breakfasts)

Serve as a chaperone for retreats/service/other events

Help plan/execute service projects/mission trips

Serve as a driver for retreats/service/other events

Prepare/provide meals/snacks for youth gatherings/events

Help plan/execute social/fun events

Other ways you would like to be involved:

Photo Release

May we post photos of your teen(s) on our Facebook page/group and on the parish website to advertise the ministry?

Yes No

Annual Registration Fee*

Registered teens receive a significant discount on activity fees (e.g., retreats, trips, off-site recreation) and receive a Catholic Youth Bible. All teens are always welcome regardless of their registration status.

Registered Parishioners: \$40.00 first youth; \$25.00 each additional youth

Not registered at Little Flower: \$60.00 each youth

Total number of youth _____ **Total registration fees due:** \$ _____

I would like to provide a scholarship for another participant \$ _____

I would like to make an additional donation to SouLFood Youth Ministry \$ _____

Total \$ _____

Please make checks payable to St. Therese, Little Flower Catholic Church.

**If your family is experiencing financial hardship, please inquire about a scholarship toward the registration fee. We do not want financial difficulty to prevent any teens from participating!*

Registration Checklist

Please return...

Parent Registration form

Teen Registration form

Registration fee

**...to Hannah or the Little Flower parish front office no later than August 17, 2014
(registration may be turned in at the August 17th parent meeting).**

Thank you for encouraging the faith life of your child!