

McFarlin United Methodist Church
Youth Ministry



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For Office Use

DATE

PAYMENT

EVENT REGISTRATION FORM

Event you are registering for: _____

Participant's Information:

Name: _____ Birth date: _____

Mailing Address & zip code: _____

Phone Number: _____ Youth Email Address: _____

School: _____ Grade: _____

If you're a visitor, who invited you? _____

Parent Information:

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

Work Number: _____ Work Number: _____

Cell Number: _____ Cell Number: _____

Email Address: _____ Email Address: _____

Other Contact Number: _____

Emergency Contact and phone number (other than parents):

McFarlin Youth Ministry

Consent to Participation and Treatment

I, _____, parent or legal guardian of _____, hereby consent to the participation of said youth in the _____. I also consent to any hospital, medical, or surgical care and treatment as well as the administration of anesthesia, determined necessary by a qualified physician to be necessary for the welfare of my youth while said youth is under the care, custody, and control of the Youth Ministry of McFarlin Memorial United Methodist Church, and I am not reasonably available by telephone to give consent.

Parent Signature

Date

What allergies to food or drugs does said youth possess?

What special medications does said youth take?

Are there any other medical, physical, or emotional conditions that the staff of McFarlin Youth Ministry should be aware of when dealing with said youth?

Family Physician _____ Phone Number _____

Insurance Company _____ Phone Number _____

Policy Number _____ Group Number _____

Expectations/Covenant

1. Respect is a key expectation at all McFarlin Youth Ministry events and activities.
2. Youth will treat EVERYONE they come in contact with in a loving and respectful attitude and manner.
3. Anyone found in possession or consumption of alcohol or illegal drugs will be sent home at their own expense. Also possession of weapons is cause to be sent home. Tobacco products are not allowed.
4. Any youth who does not follow the above expectations or the expectations and rules set forth during the event will be sent home at their own expense.

Youth Signature

Parent Signature