

**HOLY FAMILY YOUTH MINISTRY
REGISTRATION FORM FOR HIGH SCHOOL STUDENTS**

School year: **2015 - 2016**

TEEN'S NAME: _____ TEEN'S NAME: _____

TEEN'S Birthdate _____ TEEN'S Birthdate _____

SCHOOL: _____ GRADE: _____ SCHOOL: _____ GRADE: _____

TEEN'S NAME: _____ TEEN'S NAME: _____

TEEN'S Birthdate _____ TEEN'S Birthdate _____

SCHOOL: _____ GRADE: _____ SCHOOL: _____ GRADE: _____

Permission for social media usage

According to diocesan policy, adults in our ministry programs are not allowed to communicate with teens in the program without written permission from a parent/guardian. Holy Family Youth Ministry uses new & social media for effective & timely communication with our youth and family via their personal media preferences. Adults in our program will not initiate online relationships, but will respond to inquiries back through whatever medium the questioner uses. If you as a parent or guardian, have any particular boundaries of which we should be aware, of that you want us not to use in communicating with your child, please let us know.

Please mark which social media vehicles we are allowed to use to communicate with your child

Facebook _____ **Twitter** _____ **Email** _____ **Text** _____

Teen email address: _____

(For multiple youth, please list name then email address, use back of form if necessary) (for Youth Minister and Office Use only)

MAILING ADDRESS: _____

Street

City

Zip

HOME PHONE #: _____

PARENT/GUARDIAN INFORMATION:

Children live with: Mother _____ Father _____ Both _____ Other _____

FATHER _____

MOTHER _____

Or

GUARDIAN _____

Parent/Guardian E-mail Address: _____

(for Youth Minister and Office Use only)

PARENT/ GUARDIAN MAILING ADDRESS (if different from teen):

Street

City

Zip

THIS PROGRAM IS MADE POSSIBLE ONLY THROUGH PARENT AND ADULT VOLUNTEER COOPERATION. PLEASE CHECK THE AREAS OF YOUTH MINISTRIES YOU FEEL CALLED TO HELP WITH THIS YEAR: (PLEASE MARK ALL INTERESTS)

_____ ADULT LEADERSHIP TEAM _____ Drop In Center Chaperone

_____ HOSPITALITY MINISTRY _____ FUNDRAISING TEAM

_____ RETREAT TEAM _____ PHOTOGRAPHY/WEBPAGE

_____ SPECIAL EVENTS _____ DRIVER

_____ SOCIALS _____ JUSTICE & SERVICE PROJECTS

_____ SMALL GROUPS _____ OTHER TALENT: PLEASE SPECIFY

Name of interested adult volunteers: _____

Contact information of adult: _____