

## YOUTH CLUB REGISTRATION FORM

ST. JOHN'S EVANGELICAL LUTHERAN CHURCH | 45 NORTH READING AVENUE | BOYERTOWN, PA | 610-369-1024

Please return this form via mail attention, Parish Administrator or drop in the church office lockbox.

Child's Name	Grade (2017-2018)	Birthdate	School

### CONTACT INFORMATION

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<b>Mother's Name</b>	Home Phone	Cell Phone
Address		
	Yes      No      Not Sure	
Email	Are you a member of St. John's?	

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<b>Father's Name</b>	Home Phone	Cell Phone
Address		
	Yes      No      Not Sure	
Email	Are you a member of St. John's?	

It is our goal to make St. John's Evangelical Lutheran Church Youth Group a wonderful experience for your child!

- If your child has **allergies or health concerns** that our volunteer staff should know about, please check here and list that information on the back of this sheet.
- If your child has any **special needs** that our volunteer staff should know about, so we can be better prepared with appropriate materials and extra help, please check here and a member of our education team will contact you.

My child is a student at Boyertown Elementary School and has permission to ride the mini-bus from school to St. John's Evangelical Lutheran Church, Boyertown.

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Parent/Guardian Signature	Date
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I, \_\_\_\_\_, hereby grant to St. John's Evangelical Lutheran Church, its employees and agents, the right to use or publish my image or my child's image, likeness, photo, signature, interview comments, voice, or artistic contribution of the purposes of presenting, promoting, advertising, and/or fundraising for the parish and its programs.

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Parent/Guardian Signature	Date
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Please contact Sharon Smith with any questions, 610-369-1024 or [ssmith@stjohnsboyertown.org](mailto:ssmith@stjohnsboyertown.org)