

Pella Lutheran Church – Youth Ministry Program

Registration Form for RETURNING Students

Parent/Guardian:

Please complete and sign this registration form, allowing your student(s) to participate in our Youth Ministry Programs. If you have had major changes, e.g., phone number, address, etc., please let us know on the back of this form.

Student Information:

First and last name:	Student's grade:	Allergies? (Circle N or Y)		If yes, please explain:	Special Needs? (Circle N or Y)		If yes, please explain	
		No	Yes		No	Yes		
	<u> </u>	No	Yes		No	Yes		
	· <u></u>	No	Yes		No	Yes		
	·	No	Yes		No	Yes		
		No	Yes		_ No	Yes		
Emergency Contact Informatio	<u>n:</u>							
In case of an emergency, we will like to provide as an emergency Emergency Contact (Not a pare Name:	y contact, pleas	se do so	here:	iaii(s) iiist. ii you	nave son	ieone es	se you would	
Last	First			Mid. Initial				
Relationship to student(s):								
Phone number to call first:Phone number to call second: _			□ Home □ Home	□ Wo □ Wo				
Parent/Guardian Consent: The student(s) listed on in the Youth Ministry Programs I understand that Pella worthwhile environment for my incidents that might happen whequally and fair. I understand the from a parent/guardian. I will construct By checking below, I do obtained during Youth Ministry 'Yes, you have my perro	provided by Powill take all pre y student(s). I continue my student hat Pella canno ontact the Chu do not grant powers	ella Luth caution do not h t(s) are i ot give m rch offic ermission ities for	neran C s and p old Pell in their ny stude ce with on to Pe its onli	hurch. rovide to the best la or its volunteer care. I understance ent(s) any medica any questions or ella to use picture	of its ab s liable fo d that eac tion with concerns s or vide ublication	ility a saf or any inj ch studer out writt os of my	e and uries or nt is treated en consent	
Parent/Guardian Signature		 Please print name				 Date		

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