

St. John in the Wilderness Episcopal Church
Registration for 2007-2008 Junior and Senior High Youth Programs

Name: _____ Nickname: _____ D.O.B.: _____ Grade: _____

Address/ City: _____ zipcode _____

Parent Email: _____ Youth Email: _____

Name of Parent/Guardian(s): _____

Home Phone: () _____ Parent Wrk. Ph: () _____

Medical/Allergy/Diet/Learning Information: _____

Medical Insurance Company: _____

Policy/Member Number: _____

Additional Emergency Contact: _____ Ph: () _____

I would like to be included in the 2007/2008 youth directory: YES NO

Check those that you have participated in:

acolyte choir handbells usher/greeter _____ instrument reader/lector Altar Guild

Check those that you'd like to participate in:

acolyte choir handbells usher/greeter _____ instrument reader/lector Altar Guild

Youth Covenant

As a participant in the youth program at St. John's I agree to abide by the following guidelines for all youth events for the 2007-2008 school year.

- I agree not to use tobacco, alcohol, or illegal drugs.
- I will respect the needs and property of others.
- I will not participate in any violent behavior or inappropriate sexual behavior.
- I will be present for the entire event or program and participate in all scheduled activities, unless arrangements are made in advance.
- I will respect the adult leaders and all other participants, treating everyone as I would want to be treated.
- I understand that if I make bad choices that put myself or other participants in any danger, my parents will be contacted and may be asked to come and pick me up early from the event.

Youth's Signature _____ **Date** _____

Media Release Form

On behalf of _____ the undersigned parent does agree to grant St. John in the Wilderness permission to record the participation of their child, on film or tape, in youth events throughout the year. The parent/guardian further agrees that any or all of the material recorded may be used by or for St. John in the Wilderness or the Diocese of Minnesota and that such use shall be without payment of fees or other compensation to or for the benefit of the minor child, parent, or any other person or entity.

Parent/Guardian: _____ Date: _____