

# Youth Group Registration 2009 - 2010

All data collected is *CONFIDENTIAL*. Information will be used for internal purposes only, will *not* be shared with other organizations, and will be stored securely.

We respectfully ask for a donation of \$25 to help offset the cost of our program.

If you are unable to donate, please pray for the youth of our parish and program. All are welcome either way!

Thank you!

## \*\* Youth Information (please print) \*\*

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 School: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender:  Male  Female  
 E-mail Address: \_\_\_\_\_  
 Home Church: \_\_\_\_\_  
 Youth Lives with:  Parents  Mother  Father  Guardian  Other: \_\_\_\_\_

Religious Preference:  
 Catholic Lutheran Nazarene Baptist Methodist Episcopal Other: \_\_\_\_\_

Have you:	Do you / will you:
Been Baptized? <input type="checkbox"/> Y <input type="checkbox"/> N	Attend mass/services regularly? <input type="checkbox"/> Y <input type="checkbox"/> N
Been Confirmed? <input type="checkbox"/> Y <input type="checkbox"/> N	Attend Youth Group regularly? <input type="checkbox"/> Y <input type="checkbox"/> N
Received First Eucharist? <input type="checkbox"/> Y <input type="checkbox"/> N	Pray regularly? <input type="checkbox"/> Y <input type="checkbox"/> N
Received Reconciliation? <input type="checkbox"/> Y <input type="checkbox"/> N	Have a faith mentor/friend? <input type="checkbox"/> Y <input type="checkbox"/> N
	Have an adult mentor/friend? <input type="checkbox"/> Y <input type="checkbox"/> N

Would you like to:	Are you interested in:
Be an usher at Mass? <input type="checkbox"/> Y <input type="checkbox"/> N	Community service? <input type="checkbox"/> Y <input type="checkbox"/> N
Be a greeter at Mass? <input type="checkbox"/> Y <input type="checkbox"/> N	Adoration? <input type="checkbox"/> Y <input type="checkbox"/> N
Be on a Prayer Team? <input type="checkbox"/> Y <input type="checkbox"/> N	Becoming a Catholic? <input type="checkbox"/> Y <input type="checkbox"/> N
Receive the updates via e-mail? <input type="checkbox"/> Y <input type="checkbox"/> N	Other: _____

## Parent/Guardian Information (please print)

Mother / Guardian Name: _____	Father / Guardian Name: _____
First _____ Last _____	First _____ Last _____
Street: _____	Street: _____
City & Zip: _____	City & Zip: _____

### Contact Phone Numbers:

	<b>Home</b>	<b>Cell</b>	<b>Work</b>
Mother / Guardian: _____	_____	_____	_____
Father / Guardian: _____	_____	_____	_____

### E-mail Addresses:

Mother / Guardian: \_\_\_\_\_  
 Father / Guardian: \_\_\_\_\_  
 Parent / Guardian Home Church: \_\_\_\_\_

### Parent / Guardian Religious Preference:

Catholic Lutheran Nazarene Baptist Methodist Episcopal Other: \_\_\_\_\_

## Transportation to/from Youth Group

Archdiocesan policy prevents adult leaders from providing transportation to and from youth group for your son/daughter. If your youth has not been picked up by 9:05 pm after Youth Group, the individuals below will be contacted. If they do not arrive to pick up your youth by 9:15 pm, we will contact the police. If parents/guardians cannot be reached, notify the following that will provide transportation, if necessary.

1. \_\_\_\_\_  
Name Best Phone Number
2. \_\_\_\_\_  
Name Best Phone Number

**I, as the parent/guardian of this participant, agree to these guidelines for my teen.**

\_\_\_\_\_ Signature \_\_\_\_\_ date

### YOUTH CODE OF CONDUCT

Print Youth Name Clearly: \_\_\_\_\_

1. I agree to respect the rights and property of others. I understand that neither vandalism nor stealing nor misuse of property will be tolerated. Financial obligations that result from such behavior will be the sole responsibility of me and my family.
2. I agree to respect adult leaders and other participants.
3. I agree to demonstrate Catholic Christian values by my language and behavior.
4. I understand that the following behavior is appropriate conduct.  
† One armed side hugs      † Handshakes      † High fives and hand slapping  
† Verbal praise      † Arms around shoulders      † Hold hands during prayer
5. I understand that the following behaviors are samples of inappropriate conduct. Please note that this list is not exhaustive.  
† Kissing      † Inappropriate touching      † Verbal sarcasm or aggressiveness  
† Any form of unwanted affection      † Compliments/comments relating to someone's body
6. I agree not to possess any drugs, tobacco, alcohol, fireworks, matches, cigarette lighters, knives, or items that would endanger people, pets, wildlife, or property or are illegal.
7. I agree to dress appropriately. I understand that the adult leaders may make a judgment call regarding my clothing and I agree to take action as advised. Clothing such as short shorts, low-cut tops, low-riding pants, etc. and any clothing that has any reference to tobacco or alcohol products including insignias or advertisements are not acceptable.
8. I will act as a lady or gentleman and refrain from any sexual misconduct.
9. I will not leave an event, unless my adult leader grants permission.
10. I will not bring radios, boom boxes, CD players, iPods, video games or other electronic device to an Youth Group or events, unless otherwise noted.
11. I will not use my cell phone during Youth Group for calls or text messaging.

I understand the need to agree to the above items. I realize and agree that if I do not abide by these rules, I may lose the privilege of attending a scheduled activity, or may be sent home at the discretion of the adult leader. I will be responsible for all consequences of my behavior.

**I, as a participant, agree to abide by these guidelines.**

\_\_\_\_\_  
Youth's Signature

\_\_\_\_\_  
Date



Please sign and complete the following form and return it with your registration.

In case of a medical emergency, if I cannot be reached, I request that the Youth Minister / Adult Leader act in the best medical interests of my child and I agree to assume all expense for moving and medically treating him/her. I also hereby consent to any treatment, surgery, diagnostic procedures or the administration of anesthesia which may be carried out based on the medical judgment of the attending physician.

I hereby consent to participation by (print youth name) \_\_\_\_\_.  
I assume all risks and hazards incidental to such participation and do hereby release, absolve, indemnify, and agree to hold harmless the Corporation of the Catholic Archbishop of Seattle, staff, volunteers and drivers from any and all liability that may arise out of participation in this activity. I also give consent for emergency medical treatment if necessary. I do request, if possible, I be contacted prior to treatment. As parent/legal guardian, I remain fully responsible for any legal responsibility which may result from any personal actions taken by the named participant.

I consent further to the conditions stated above, including the method of transportation.

<p>Our Lady of Lourdes <input type="checkbox"/> does <input type="checkbox"/> does not have my consent to use pictures of _____ on parish bulletin boards or on the parish website. (print youth name)</p>
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\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date