

Youth Ministry Information Sheet

Name of Student: _____

Name of Parish: _____

Address: _____

Birthdate: _____ Parent Phone: _____ Parent Email: _____

School Attending: _____ Age: _____ Grade (By September of 2022): _____

Please complete all relevant information:

Mother's Full Name: _____ Mobile Phone: () _____

Father's Full Name: _____ Mobile Phone: () _____

Legal Guardian's Full Name: _____ Mobile Phone: () _____

Name of **primary emergency contact**: _____ Mobile Phone: () _____

Are there any medical, physical or cognitive conditions that the youth ministry team needs to be aware of, such as allergies, seizures, physical limitations, etc.? Yes No

If yes, please describe condition and any appropriate guidelines for our volunteers. We also recommend speaking directly to Fr. Tom , Sister Mary Eileen, and/or Mrs. Diana Vukel.

Please **INITIAL** all appropriate items:

_____ I give you permission to contact my child via text using the youth FLOCKNOTE (Safe-Environment compliant)

Camper's Mobile Phone: _____

_____ I give you permission to contact my child via email using FLOCKNOTE and/or via the parish youth account at youth@sapwh.org. (Safe-Environment compliant)

Camper's Email: _____

_____ I give my child permission to participate in virtual meetings via the Zoom platform for youth ministry related activities.

_____ I give permission for my child to be photographed or recorded on video during the course of youth ministry events. By initialing I provide consent for their image to be used in either print, electronic or video form for the promotional purpose of future activities.

_____ I give my child permission to participate in Camp Wildfire on Tuesday July 12, 2023, through Saturday July 16, 2022, from 5 pm to 9 pm on Tuesday - Friday and 10:00 am - 9:00 pm

_____ I give my child permission to walk home from St. Anthony's Church at the close of the camp each day.
Please note that your child will not be released *before 9:00 pm* unless we have verification from you of this change.

_____ I give my child permission to be picked up at 9:00 pm at the close of the camp by the following person(s) other than myself:

Name of Alternate Pickup: _____

Name of Alternate Pickup: _____

Please feel free to include any notes or comments:

Signature of Parent/Legal guardian:

_____ Date: _____

Camp Request:

What is your child's shirt size?

Adult Small Adult Medium Adult Large Other _____