

Saints Philip & James Church

Youth Ministry Program

Membership Form

Youth participant's full name: _____ date of membership: _____

Date of birth: _____ Sex: _____ male _____ female

Address: _____

Home phone: _____ Email (student): _____

School: _____ Grade: _____

Father's / Guardian's full name: _____

Work phone: _____ Cell phone: _____

Email: _____

Mother's / Guardian's full name: _____

Work phone: _____ Cell phone: _____

Email: _____

Emergency Contact name: _____ Phone: _____

Student's sports, teams, hobbies, talents, etc... _____

Other leisure activities student likes (ex. movies, rollerblading, etc...)

Sports, hobbies or skills student would like to learn: _____

Ideas for discussion topics (ex. friendship, peer and/or academic pressure, self esteem, etc...)

I would like my child to learn leadership skills and learn to organize activities: Yes No Unsure

Carpool friends _____ Best friends _____

Ideas for projects, trips and activities I would like to see this group do:

Please check one or more (if possible). I would like to help with:

____ Supervising and being a regular member of the adult team

____ Spiritual discussions and activities

____ Chaperoning trips to social and/or service events

____ Teaching a sport, craft, etc. at your convenience

____ Discussion leader at meetings - ____ Monthly ____ Once in a while when needed

____ Phone chains

____ Sports activities

____ Chaperoning dances

____ Helping with fundraisers

I give my permission for my child's picture to be taken as a part of youth ministry activities and to be used in any promotion of parish youth activities including the website.

Signature of Youth Participant

Date

Signature of Parent or Legal Guardian

Date

Saints Philip & James Church

107 N. SHIP ROAD, EXTON, PENNSYLVANIA 19341-2810
(610) 363-6536 • FAX (610) 524-7359

We (I) as parent(s) or legal guardian(s) of _____ give permission for our child to participate in the SS Philip and James Parish Youth Ministry Program and all their related activities/events/programs on and off parish property for the entire youth ministry year (September 1 until August 31 of the following year). We (I) understand that our (my) child will participate in games such as basketball, soccer, softball and other physical activity types of sports. We (I) understand that the Youth Group requires its members be covered by some kind of accident insurance in order to participate in physical sports. If we (I) are unable to be reached in the event of any physical injury to our (my) child, we (I) give our (my) permission for the adult advisor to authorize medical treatment for our (my) child at the nearest medical facility.

In signing this, we (I) also give my permission for any provided transportation during the course of the activities/events/programs. We (I) understand that all transportation to and from youth ministry events is our (my) responsibility. We (I) do not hold any of the parties involved responsible for transporting my child to and from youth ministry.

In consideration for our (my) child's participation, we (I) and our (my) child agree and understand that we assume the risks inherent in the Youth Ministry Program, and with full knowledge of the risks, we (I) agree to release and hold harmless SS Philip and James Parish, and the Archdiocese of Philadelphia and their employees and representatives, from claims arising or related to our (my) child's participation.

Our (my) child understands and agrees to abide by all rules and regulations established by the youth ministry.

Student's signature

Date

Parent's/Guardian's Signature

Date

Parent's/Guardian's Signature

Date

Coordinator of Youth Ministry

Received