

ST. ELIZABETH YOUTH



- PRAY -



- SERVE -



- LEAD -

melville, new york

Program Registration Form

Ignite – 6th graders meet once a month after five o'clock Mass.

R.E.A.L.

(Righteous, Engaged, Active, Loved)– 7th and 8th graders meet after 5 PM Mass on alternating Saturdays.

L.I.F.E.

(Living In Faith Everyday)– 9th -12th graders meet Sunday at 7 PM.

Youth Information

Name: _____

Birthdate: _____

Address: _____

City/Zip: _____

Telephone: _____

E-mail: _____

School Attending: _____

Grade: _____ Parish: _____

Activities involved in:

Youth Declaration

I understand that by participating in St. Elizabeth Youth Ministry, I am representing myself, my family, my community, my church, and my God, and will conduct myself as a Christian. I understand that if I don't "play by the rules", I may not be invited back to other St. Elizabeth Youth Ministry events.

Signature: _____

Parent/Guardian Information

Parent/Guardian Name(s): _____

Alternate Phone Number: _____

Parent/Guardian E-mail: _____

Will you be able to help us during the year? _____

Photo Release:

I give permission for my child to be photographed by St. Elizabeth of Hungary or their representative. These photographs may be used in publications, including electronic publications or in audio visual presentation, promotional literature, advertising or in other similar ways.

Initials: _____

Check all that apply:

My child has permission to walk home.

My child has permission to drive him/herself to/from youth group.

My child has permission to leave youth group with the following licensed driver(s): _____

My child has permission to participate in St. Elizabeth of Hungary Youth Ministry this year.

Parent/Guardian Signature: _____

Date: _____



Allergies/Special Needs/Medical Needs: _____ Emergency #: _____

_____ Emergency Contact: _____

_____ Relationship: _____