

Saint Elizabeth Ann Seton Catholic Church
Youth Ministry Registration Form
This form is for 9th – 12th Grade Youth

YOUTH INFORMATION

Youth Name: _____ Grade Level: _____ DOB: _____

Youth Phone: _____ Youth Email: _____

High School: _____ IEP: Yes: No:

Please list any medical concerns, allergies, dietary restrictions, special needs below:

Youth Baptized: Yes: No:
Received Eucharist: Yes: No:
Received Confirmation: Yes: No:

CONFIRMATION PREPARATION AND YOUTH MINISTRY
OPERATE AS TWO DIFFERENT ENTITIES. MARK HERE IF
YOU ARE ONLY INTERESTED IN CONFIRMATION

PARENT INFORMATION

Parent Name: _____

Parent Phone: _____ Parent Email: _____

Parent Name: _____

Parent Phone: _____ Parent Email: _____

Mailing Address: _____

City: _____ State: NC Zip Code: _____

Non-Parent Emergency Contact: _____ Phone Number: _____

DISCLOSURES

Initials I understand that text messaging is the primary form of communication that will be utilized between youth ministry leaders and teens.

Initials I understand that email is the primary form of communication that will be utilized between youth ministry leaders and parents.

Initials I understand that social media applications such as, Instagram, Snapchat, Facebook, etc. may be used by youth ministry leaders to maintain contact with and facilitate communication with teens.

Initials I understand that photos of teens may be used for promotional and spiritual purposes, including via affiliated websites and social media outlets.