


Student Information

Last _____ First _____ Middle _____

Preferred name/nickname _____

Birth date _____

 School _____ Grade _____ Male Female

 Baptized Yes No

 Confirmed Yes No

Current Church _____

Home Mailing Address _____

City _____ State _____ Zip _____

Student Interests/Hobbies circle all that apply
Sports: Basketball Baseball Football Soccer Volleyball Gymnastics

Golf Hockey Swimming Broomball Tennis Lacrosse Wrestling Track

Gymnastics Water-ski Lacrosse Ski/snowboard Other _____

Arts: Singing Drama Dance Paint/Draw Poetry

Instrument(s) _____ Other _____

Tech: Computers/Media Sound Lights Powerpoint

Other _____

Additional hobbies and activities not listed above:

Yes, I am interested in or committed to attending and participating in the following:

 Crossroads (junior high ministries)

Student Signature _____ Date _____

We ask for a registration fee of \$35 per students. Please do not let this fee prevent your child from joining, see Colin if this is a problem.

Office use only:

Paid date: _____ check #: _____ cash: _____

Family Information

Father's name _____ Cell phone _____

Mother's name _____ Cell phone _____

Student resides with: Mother
 Father
 Both parents

Parents: Please provide email address(es) where we can send updates and information on programming and events

Children in addition to Crossroads student

Name _____	Age/grade _____
Name _____	Age/grade _____
Name _____	Age/grade _____

List one emergency contact, other than parent:

Name _____ Relationship to student _____

Phone(s) _____

Medical Conditions/Allergies/Special Needs

Photo Release/Waiver

As a participant in this program, I recognize that periodically the youth ministry staff takes pictures and/or videotapes at youth gatherings and activities to be used in publicizing the program/ministry within the congregation. In registering for this program, I permit pictures to be taken of my child.

Parent/Guardian Signature _____ Date _____