

Teen Information

Date: _____

Teen Name: _____
(Last) (First)

Address: _____
(Street) (Apt #)

(City) (State) (ZIP Code)

School Attending: _____

Grade Level: _____

Date of Birth: ____ / ____ / ____

Sex: F / M

T-shirt Size (men's/unisex): _____

Known Allergies/Special Considerations: _____

Parent/Guardian Contact

Name: _____

Relationship: _____

Best Phone Number: _____

Email: _____

Name: _____

Relationship: _____

Best Phone number: _____

Email: _____

Emergency Contact: _____

Relationship: _____

Best Phone Number: _____

Promotional Media Release

During the years in Youth Ministry, _____
(Youth Name) may participate in videotape, motion picture, audio recording or still photograph productions that involve the use of teens' first name, likenesses or voices. News media, including representatives of television, radio, newspapers and magazines, also often are permitted on parish property and may take notes, still, photos, sound recordings and/or moving pictures that may include your child. These items may appear or be used in news or feature stories by print, television or radio media.

I/We, the undersigned, **DO / DO NOT** (Circle One) hereby consent that St. Andrew may use the name, portrait, or other likeness of my child for the bulletin, Website, news releases, media and promotional activities.

This consent is good for all the years the teen will be participating in our youth events.

Please complete one for each teen that will be participating in any of our activities.

Father or Legal Guardian's Name (print) Father or Legal Guardian's Signature

Date

Mother or Legal Guardian's Name (print) Mother or Legal Guardian's Signature

Date

God bless!

Margaret Kozak Youth Minister

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