

NORTH BRANCH REFORMED CHURCH 2019-20 YOUTH REGISTRATION

(Please return to Pastor Mark, Church School Teachers or Youth Group Leaders)

Family Last Name _____ Home Phone _____

Address _____ City _____ State _____ Zip _____

Mother _____ Father _____

Cell Phone _____ Cell Phone _____

E-mail _____ E-mail _____

North Branch Reformed Church has my permission to use photographs of all listed here for church promotional purposes.

Parent/Guardian Signature _____ Date _____

BREAKING NEWS/UPDATES: Many times, there are reminders for scheduled events. What is the best way to inform you? (Please check all that you would like)

- E-mail Mother
- E-mail Father
- E-mail Child

- Text Message Mother
- Text Message Father
- Text Message Child

(Please Complete Reverse Side)

Child #1 _____ **DOB** _____

Cell Phone _____

School _____ Grade _____

Special Needs _____

Allergies _____

Other Groups (sports, music groups, scouts, 4H, etc.) _____

Child #2 _____ **DOB** _____

Cell Phone _____

School _____ Grade _____

Special Needs _____

Allergies _____

Other Groups (sports, music groups, scouts, 4H, etc.) _____

Child #3 _____ **DOB** _____

Cell Phone _____

School _____ Grade _____

Special Needs _____

Allergies _____

Other Groups (sports, music groups, scouts, 4H, etc.) _____

Child #4 _____ **DOB** _____

Cell Phone _____

School _____ Grade _____

Special Needs _____

Allergies _____

Other Groups (sports, music groups, scouts, 4H, etc.) _____

(Please Complete Reverse Side)