



St. Andrew's Youth Formation

2023-2024 Registration Form (Nursery - 12th Grade)

YOUTH INFORMATION (more spots on the back)

Full Name: _____ **Goes by:** _____

Birth Date: ____/____/____ Age: ____ Grade in 2023/24: ____ Pronouns: ☐ She/Her ☐ He/Him ☐ They/Them

Special Needs: _____ Allergies: _____

Full Name: _____ **Goes by:** _____

Birth Date: ____/____/____ Age: ____ Grade in 2023/24: ____ Pronouns: ☐ She/Her ☐ He/Him ☐ They/Them

Special Needs: _____ Allergies: _____

Full Name: _____ **Goes by:** _____

Birth Date: ____/____/____ Age: ____ Grade in 2023/24: ____ Pronouns: ☐ She/Her ☐ He/Him ☐ They/Them

Special Needs: _____ Allergies: _____

PARENT/GUARDIAN INFORMATION

Full Name: _____ **Relationship to Youth:** _____

Cell: _____ Email: _____

Full Name: _____ **Relationship to Youth:** _____

Cell: _____ Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

CODE OF CONDUCT

I will respect myself and others. I will listen. I will wait my turn.
I will share. I will try to act—to the best of my ability—as Jesus would want me to.

VOLUNTEERING

Parents with children in the **Nursery** and **Pre-K** classes are asked to volunteer as an assistant to the teacher on a rotating schedule.

Parents with children in the **K-5th** grade class may be called upon from time to time to volunteer if a substitute is needed.

- ☐ **I understand and agree to the code of conduct as well as the requested volunteer commitment for the Sunday School classes.**

PHOTO CONSENT

Do you give permission for St. Andrew's to use photos of your children on the church's website, Facebook & Instagram pages, and/or in printed material? The names of children will never be used with the pictures. ☐ **Y** ☐ **N**

Additional Help: (check all that apply)

- ☐ I am interested in helping with **Nursery** and/or **PreK**.
☐ I am interested in helping with the **K-3rd** age group.
☐ I am interested in helping with the **4th-5th** age group.
☐ I am interested in helping with the **6th-8th** grade class.
☐ I am interested in helping with the **9th-12th** grade class.

Parents must stay on-site while their children are attending formation classes.

Signature: _____ Date: _____

ADDITIONAL YOUTH INFORMATION

Full Name: _____ **Goes by:** _____

Birth Date: ____ / ____ / ____ Age: ____ Grade in 2023/24: ____ Pronouns: ☐ She/Her ☐ He/Him ☐ They/Them

Special Needs: _____ Allergies: _____

Full Name: _____ **Goes by:** _____

Birth Date: ____ / ____ / ____ Age: ____ Grade in 2023/24: ____ Pronouns: ☐ She/Her ☐ He/Him ☐ They/Them

Special Needs: _____ Allergies: _____

Full Name: _____ **Goes by:** _____

Birth Date: ____ / ____ / ____ Age: ____ Grade in 2023/24: ____ Pronouns: ☐ She/Her ☐ He/Him ☐ They/Them

Special Needs: _____ Allergies: _____