

**Confirmation Information/Registration Form
Summer 2013**

Please complete the following information and return to the Main Office

Youth Name _____ Has the youth been baptized? _____

M/F _____ Grade _____ School _____ Birthday ____/____/____

Address _____ City _____ Zip _____

Youth Phone (____) _____ Youth Email _____

Parent/Guardian Name _____ Relation _____

Parent Phone (____) _____ Parent Email _____

Parent/Guardian Name _____ Relation _____

Parent Phone (____) _____ Parent Email _____

First Call in Case of Emergency (____) _____ Name _____

Allergies or Other Medical Concerns? _____

I _____ (Parent /Guardian) give my permission for

_____ (Youth) To participate in Nardin

Park United Methodist Church Confirmation ministry. I, who by law may do so, authorize the administration of emergency medical treatment to she/he who is the subject of this form. I understand all reasonable safety precautions will be taken at all times by Nardin Park United Methodist Church personnel. I understand that in the event medical intervention is needed, every attempt will be made to contact the parent(s) above immediately. I also release Nardin Park United Methodist Church and the leaders and drivers of responsibility for accidents incurred while my child is attending this event.

☐ Photos of my child may be posted on the internet and in Nardin Park publications (ex. Newsletter, Facebook, Website).

☐ Photos of my child MAY NOT be posted on the internet nor in Nardin Park publications.

Parent Signature _____ Date _____