

COTTAGE LAKE PRESBYTERIAN CHURCH

Youth Connect Registration Form – 2017-2018

Name _____ Birthday __ / __ / __

Grade _____ School _____

Address _____

City _____, WA Zip Code _____

Teen Cell _____ Teen E-Mail _____

Best way to Contact Teen: Cell / Home Phone / Text
(circle one)

Parents _____

Home Phone _____

Mom Cell _____ Dad Cell _____

Mom Work _____ Dad Work _____

Mom E-Mail _____

Dad E-Mail _____

Best Way/s to Contact You:

E-Mail Cell Phone Home Phone Text

Registration Fee:

\$120 per 27-week year: \$60 per half (Sept-Dec & Jan-Apr)

(Simply to help offset the cost of dinner each week. Scholarships available.)

I DO/DO NOT (circle one) give permission for my child to be photographed and/or videotaped (for end of year slide show, etc.)

Are there any medical, developmental, behavioral, dietary or allergy concerns that we should know about that may affect the child's participation in Youth Connect? _____

In the case of a medical emergency, Cottage Lake Presbyterian Church staff/volunteers are authorized to get immediate medical assistance.

Parent Signature : _____ **Date:** _____