

UMYF Student Information Form

Student Name:		Shirt Size:
Address:	City/Zip:	
Parent Name:	Parent Phone:	
Parent Email:		
Parent Name:	Parent Phone:	
Parent Email:		

Student Activity Information:

2015-16 Grade:	School:	Birthday:
Extracurricular Activities:		

Electronic Communication:

<input type="checkbox"/> UMYF Leaders may contact my student directly via:	<input type="checkbox"/> Email	<input type="checkbox"/> Cell Phone/Text
Student Email:	Student Cell:	
OR <input type="checkbox"/> I DO NOT give my permission for UMYF Leaders to contact my student via email or phone/text.		
Signed:	Date:	

Emergency Contact/Health Information:

Name:	
Relationship:	Phone:
Allergies/Health Concerns:	

WAIVER - PLEASE READ

Myself and the participant(s) authorize Hays First United Methodist Church (FUMC) to use at its discretion any photograph(s) taken of the participant(s) while participating in any activity and waive any and all claims that the participant(s) or myself or their heirs, executors, administrators, or assigns may have or claim to have resulting from such photograph(s) or reproductions thereof.

I have read the above statement, understand and agree to the conditions set forth. I agree to abide by all policies and guidelines set forth by FUMC regarding this program.

Agree

Disagree

Signature of Parent/Guardian(s)

Date