

**ST. WENCESLAUS YOUTH MINISTRY  
REGISTRATION & MEDICAL FORM**

**VALID  
09/01/18 - 08/31/19**

EDGE (Grades 6-8) ♦ Life Teen (Grades 9-12)

Registration: \$20 per youth (maximum \$60 per family whether in Religious Education or Youth Ministry)

**YOUTH INFORMATION**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade in School \_\_\_\_\_ Gender  M  F

Youth's Cell ( \_\_\_\_\_ ) Youth's Email \_\_\_\_\_

Allergies (foods, drugs, insects, etc.) \_\_\_\_\_

Medications (name, dosage, reason) \_\_\_\_\_

Other information (injuries, etc..) \_\_\_\_\_

Insurance \_\_\_\_\_ Policy # \_\_\_\_\_ Last Tetanus \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

**COMMUNICATION WITH YOUTH**

In order to efficiently communicate, reminders and information may be sent via email, text messages and Facebook. Parent/Guardian authorization is required prior to communicating with youth. One parent/guardian listed below will receive a copy of emails or text messages sent to your child. Youth Ministry will not "friend" minors without parent/guardian permission. **Please check the appropriate boxes and sign the back page.**

- Yes, email may be sent to my youth
- Yes, my youth may be sent text messages
- Yes, St. Wenceslaus YM Facebook/Instagram may friend my youth

**PARENT/GUARDIAN INFORMATION**

Parent(s)/Guardian(s) \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) Dad's Cell ( \_\_\_\_\_ ) Mom's Cell ( \_\_\_\_\_ )

Dad's Email \_\_\_\_\_

Mom's Email \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Child is living with  Both parents  Mother  Father  Between both parents  Grandparents  Other \_\_\_\_\_

**EMERGENCY INFORMATION**

*In case of illness, accident or emergency to the minor named above, the Archdiocese of Portland, St. Wenceslaus Church and its representatives are authorized to proceed as indicated below (thoroughly complete the following information and number each item 1, 2, 3, etc., in the order of desired action you wish us to take.)*

Contact \_\_\_\_\_ Best Phone ( \_\_\_\_\_ ) Alternate Phone ( \_\_\_\_\_ )

Contact \_\_\_\_\_ Best Phone ( \_\_\_\_\_ ) Alternate Phone ( \_\_\_\_\_ )

Contact Family Physician (if possible) \_\_\_\_\_ Phone ( \_\_\_\_\_ )

Take Minor to Nearest Emergency Hospital \_\_\_\_\_

Other \_\_\_\_\_

**PHOTO USAGE** (St. Wenceslaus has no control over the use of photographs or film taken by media that may be covering events or by others.)

YES, St. Wenceslaus staff may use appropriate photos of my son/daughter for Facebook, Instagram, church website, bulletin, publications and in-church use. I understand no names will be published and that St. Wenceslaus Church has no control over tagging of my child, by others.

NO, St. Wenceslaus staff may not use photos of son/daughter for any purpose.

**My youth:** \_\_\_\_\_ may participate in the following St. Wenceslaus Youth Ministry off-site activities:

DATE	ACTIVITY	PARENT'S INITIALS
<b>SERVICE PROJECTS - OPEN TO GRADES 6-12:</b>		
October 6, 2018	Oregon Food Bank, Portland; 12:15 - 4:15 pm (bring sack lunch)	
January 6, 2019	St. Francis Dining Hall; 2:15 - 6:00 pm	
February 3, 2019	On Site: St. Vincent de Paul Food Bank (lunch will be provided)	
March 17, 2019	Potluck in the Park; 1:00 - 5:30 pm (tentative)	
_____, 2019	Stronger Together RMH Walk (date TBD - early morning)	
Oct. 2018 - Apr. 2019	2nd Sunday: Small group to St. Francis Dining Hall	
<b>MIDDLE SCHOOL ACTIVITIES/SERVICE (Grades 6-8):</b>		
November 13, 2018	Thanksgiving Craft with Rose Valley Residents; 6:15 - 8:00 pm (Additional dates may be added)	
December _____, 2018	Called Rally (date, location and time TBD)	
December _____, 2018	Health Care Packets for Share & Care at Fire Station	
<b>HIGH SCHOOL ACTIVITIES (Grades 9-12)</b>		
October 28, 2018	Lunch & Kruger Corn Maze; 12:30 - 4:30 pm	
January 27, 2019	Lunch & Wunderland (Beaverton); 12:30 - 4:30 pm	
February 24, 2019	Lunch & Laser Tag; 12:30 - 4:30 pm	
March 1 - 2, 2019	Archdiocese High School Rally (location TBD)	
March 5, 2019	Fat Tuesday Pizza at Pizza Vendor; 6:30 - 8:00 pm	
April 28, 2019	Taco Bell & Bowling; 12:30 - 4:30 pm	
May 20, 2019	Lunch & Mini Golf; 12:30 - 4:30 pm	

I, a parent or legal guardian of the child named give my permission for my child to participate in the above marked activities. I understand that I am responsible for any liability, which may result from actions taken by my child. I fully understand the following: that there is a risk of injury involved in any activity; that my parish and the Archdiocese of Portland are not-for-profit entities; that the chaperoning adults involved are participating solely to benefit the youth involved with the activity; that due to the nature of the activity, there may be times when the activity precludes the staff, chaperones, and volunteers from being in direct supervision of my child at all times and that I understand that I am responsible for payment for any medical costs that may be incurred due to an accident or injury. I grant permission and authorize treatment of my child by a licensed medical professional in case of any accident or illness that may arise during my child's participation in these activities. I hereby give permission for medical professionals to hospitalize, secure proper treatments for, and to order injection, anesthesia, or surgery for my child.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY**

Amount Received \_\_\_\_\_  Cash  Check # \_\_\_\_\_ Received by: \_\_\_\_\_ Balance due: \_\_\_\_\_

Youth Ministry Team or Religious Education Catechist Waiver