



United Methodist Church of Monroe
2018 – 2019 Youth Group Registration Form

Your Information

Your name _____ Birthday _____
Address _____ City, State, Zip _____
Your email _____
Your cell phone _____ Your home phone _____
What school do you attend? _____ Current grade _____
Check all that apply/Star (*) preference Phone Text Email Facebook
 Instagram WhatsApp Other _____

Family Information

Name of your Parents/Guardians

Mother's name _____	Father's name _____
Home phone _____	Home phone _____
Mother's cell _____	Father's cell _____
Email _____	Email _____
Address _____	Address _____

Medical Information

Please list any medications you are taking: _____

Dietary restrictions: _____

Allergies or other conditions that may limit activity: _____

Emergency Information (please list two)

Emergency contact name _____	Relationship _____
Home phone _____	Cell number _____
Emergency contact name _____	Relationship _____
Home phone _____	Cell number _____

Other

Any hobbies, talents or interests? _____

Anything you would like the youth group to do or get involved in? _____
