

Christ the King

Youth Ministry Registration Form

-2017-2018-

FATHER'S NAME: _____ EMAIL: _____

FATHER'S ADDRESS: _____ Cell Phone: _____
(If different from system)

MOTHER'S NAME: _____ EMAIL: _____

MOTHER'S ADDRESS: _____ Cell Phone: _____
(If different from system)

Please list ALL high school teenagers that will be/ would like to be involved in Youth Ministry:

Name	Grade	High School	Teen's Email	Teen's Cell Phone

Please mail this completed form and your check to Christ the King Youth Ministry, P.O. Box 368, Blue Mill Rd., New Vernon, NJ 07976 or drop it off at the parish office by September 6th.

Youth Ministry Registration Fee: \$175
 Please make checks payable to Christ the King Youth Ministry

If your child(ren) has/have any concerns or special needs that we should be aware of in order to better serve them, please make note of them on the back of this sheet***

Concerns or Special Needs:

Permission to Use Photographs

_____ I grant to the Church of Christ the King, the right to take photographs of me and my family during sponsored events and use photo in print and/or electronically

_____ I agree that Church of Christ the king may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.