

LIFE TEEN Registration - \$40.00

www.carencroyouth.org



TEEN INFO

Full Name _____ Grade _____ T-Shirt _____
 Mailing Address _____ City _____ State _____ Zip _____
 Home Phone (____) _____ Teen Cell Phone (____) _____
 Teen Email _____ Website _____
(Myspace, Facebook, Twitter, etc.)
 Birthday _____ School _____ Gender _____

Does the Teen have a Sibling (Brother or Sister) that has been or is enrolled in the LIFE TEEN Program? YES -or- NO
 If yes, What is the Sibling's Name _____

PARENT INFO

Father's Full Name _____ Cell Phone (____) _____
 Mother's Full Name _____ Cell Phone (____) _____
 Marital Status _____ If divorced or seperated, who does teen live with? _____
 Mailing Address _____ City _____ State _____ Zip _____
(Of the parent that teen does NOT reside with)
 Parent Email _____ Emergency Contact Phone (____) _____
(Other than Parent or Gaurdian)

SACRAMENTS

Please Circle the Sacraments that the teen has recieved: Baptism Eucharist Confession Confirmation
 Date of Baptism _____
 Place of Baptism _____
 Church Parish (Family is Registered at and Attends) _____

***We will need a copy of the teen's Baptismal Certificate ito keep on file for Confirmation.
 Please get us a copy of the Baptismal (NOT Birth) Certificate ASAP! You can email it to: johnray@carencroyouth.org***

PHOTO/VIDEO WAIVER

Permission Granted:

I hereby grant permission to my Teen to be photographed and/or videotaped during LIFE TEEN activities and events. I understand that my teen may decline to be photographed and/or videotaped at any time. I further grant permission for the photographs and/or videos to be edited, if necessary, and then publish and/or broadcast for the purpose of promoting LIFE TEEN and/or youth programs at St. Peter Roman Catholic Church.

Name (please print) _____
 Signature _____ Date _____

Permission Denied:

I hereby decline to grant permission for my teen to be photographed and/or videotaped during LIFE TEEN activities. I have instructed my teen to decline to be photographed and/or videotaped at all times. I have further instructed my teen to notify LIFE TEEN coordinators and/or CORE Leaders that he or she may not be photographed and/or videotaped under any circumstances.

Name (please print) _____
 Signature _____ Date _____

PURPOSE

Our Ministry exists to **REFLECT** Christ to un-churched teens, to **PLUG** them into a community that will **ROOT** them in their faith, and challenge them to **SPREAD** their faith to others as they **GLORIFY** God with their lives.