

# Youth Group Registration Form 2024/2025

Please print legibly!

YOUTH 1 INFORMATION

Name (First & Last): \_\_\_\_\_ Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_  
day month year

Allergies / Health Concerns: \_\_\_\_\_

Youth's Email (if applicable & they check it regularly): \_\_\_\_\_

Youth's Cell (if applicable): \_\_\_\_\_

By providing your email, you are consenting to receive emails from Westwood Church about Youth Group scheduling and activities.

School: \_\_\_\_\_ Grade: \_\_\_\_\_

I was invited by (if applicable): \_\_\_\_\_

YOUTH 2 INFORMATION

Name (First & Last): \_\_\_\_\_ Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_  
day month year

Allergies / Health Concerns: \_\_\_\_\_

Youth's Email (if applicable & they check it regularly): \_\_\_\_\_

Youth's Cell (if applicable): \_\_\_\_\_

By providing your email, you are consenting to receive emails from Westwood Church about Youth Group scheduling and activities.

School: \_\_\_\_\_ Grade: \_\_\_\_\_

I was invited by (if applicable): \_\_\_\_\_

YOUTH 3 INFORMATION

Name (First & Last): \_\_\_\_\_ Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_  
day month year

Allergies / Health Concerns: \_\_\_\_\_

Youth's Email (if applicable & they check it regularly): \_\_\_\_\_

Youth's Cell (if applicable): \_\_\_\_\_

By providing your email, you are consenting to receive emails from Westwood Church about Youth Group scheduling and activities.

School: \_\_\_\_\_ Grade: \_\_\_\_\_

I was invited by (if applicable): \_\_\_\_\_

## PARENT/GUARDIAN 1 INFORMATION

**First contact in the event of an emergency.**

Name (First & Last): \_\_\_\_\_

Relationship to Youth: \_\_\_\_\_

Phone 1: \_\_\_\_\_  Cell  Landline

Phone 2: \_\_\_\_\_  Cell  Landline

Email: \_\_\_\_\_

By providing your email, you are consenting to receive emails from Westwood Church about Youth Group scheduling and activities.

## PARENT/GUARDIAN 2 INFORMATION

**Second contact in the event of an emergency, unless one of the following options is selected.**

- Do NOT contact in the event of an emergency.
- Contact only if all other contact are not available.

Name (First & Last): \_\_\_\_\_

Relationship to Youth: \_\_\_\_\_

Phone 1: \_\_\_\_\_  Cell  Landline

Phone 2: \_\_\_\_\_  Cell  Landline

Email: \_\_\_\_\_

By providing your email, you are consenting to receive emails from Westwood Church about Youth Group scheduling and activities.

## EMERGENCY CONTACT INFORMATION (other than parents/guardians)

**The emergency contact listed below will be contacted if Parent/Guardians 1 & 2 cannot be reached.**

Name (First & Last): \_\_\_\_\_ Relationship to Youth: \_\_\_\_\_

Phone 1: \_\_\_\_\_  Cell  Landline

Phone 2: \_\_\_\_\_  Cell  Landline

# Youth Group Consent Form 2024/2025



I, \_\_\_\_\_, give permission for my child/children, (listed  
First & Last Name of Parent / Legal Guardian (please print)  
here):

\_\_\_\_\_  
First & Last Name of Child 1 (please print)

\_\_\_\_\_  
First & Last Name of Child 2 (please print)

\_\_\_\_\_  
First & Last Name of Child 3 (please print)

to participate in Westwood Church Youth Ministry activities. I hereby give church personnel the authority to act on my behalf in case of an emergency and authorize medical treatment for my child/children if necessary and I cannot be reached (emergency contact will be notified ASAP I understand that I am financially responsible.

I undertake and agree to indemnify and hold blameless Westwood Church and its pastoral staff, church staff, ministry volunteers, and Board of Elders from and against any loss, damage, or injury suffered by my child/children as a result of being a part of the activities of Westwood Church, as well as of any medical treatment authorized by the supervising individuals representing the church.

This consent and authorization is effective only when participating in events of Westwood Church.

I have read, understood and agree with the above and sign it to cover all Westwood Church Youth Ministry activities effective from the date of signing until September 30, 2025.

### Photo/Video Consent

- YES** - I authorize Westwood Church to take photos and/or video of my child/children (named above) for promotional material in the present and future.
- NO** - I do **not** authorize photos and/or video of my child/children's to be used for promotional material.

### Consent to Contact Directly

- YES** - I give consent for the Westwood Church Youth Ministry staff and volunteers to contact my child/children (named above) via text, phone, email, ministry approved social media, etc.
- NO** - I do **not** consent to my child/children being contacted directly.

\_\_\_\_\_  
Signature of Parent / Legal Guardian

\_\_\_\_\_  
Date