

** Completed forms can be returned to the Youth Offices or the Main Church Office.*



Personal Information:

 Last Name First Name

 Address Postal Code

 Home Phone Cell Phone

 Youth Email Address Parent Email Address

Date of Birth: month _____ day _____ year _____ AHC#: _____

 School Grade Gender: M F

 First Parent/Guardian Name Address if different than above

 Second Parent/Guardian Name Address if different than above



Resonate Registration:

Name one friend you would like to be in a small group with. _____

Name of Friend

I would like the same small group leader that I had last year. _____

Name of Leader

For house parties, I would like to meet in a house that is located in the area of:

- 98A (West Ed Mall, Terra Losa)
- South/West (Callingwood, West of Henday, Lessard)
- West Central (Westmount, Laurier Heights, Meadowlark)
- Whitemud Creek (Terwilligar, Riverbend)
- St. Albert

Which of the following is most important to you in being placed into a small group? (choose one)

- The friend I chose
- My leader choice
- The house party location

How to stay informed:

EZINE: *this is an email that is sent out weekly with current information and a message from each of our youth pastors.*

- Yes, please subscribe me at the above Email addresses.

Our website: *www.beulah.ca (look for the youth page under community life)*

Bulletin: *this is provided at the weekend services.*

Other Information:

I attend Beulah Y / N

Do you attend another church? Y / N

I attend _____

I would like the opportunity to be involved in:

- | | |
|----------------|------------|
| Music | Tech Team |
| Prayer | Dance Team |
| Leadership | Serving |
| Event Planning | Drama |

Informed Consent: In the event of an emergency and medical treatment is required, I give permission to the church staff and/or sponsors to obtain services for treatment as deemed necessary if I cannot be contacted in a reasonable amount of time. Further, I will hold harmless or indemnify Beulah Alliance Church for any loss or injury that may be sustained. I recognize that there are risks inherent in activities my child may be engaged in and again I waive, hold harmless, or indemnify Beulah Alliance Church, its instructors, paid or volunteer staff, successors, heirs and assigns from any action.

Parent/Guardian Signature

Date

Parent Waiver: I hereby give permission for my child to be photographed and/or filmed without any reimbursement of any kind due to me, or the need to pay any fee. Beulah Alliance Church considers all information personal and confidential and will only use it within the church for ministry or other church related activities and will not release it to outside parties or organizations.

Parent/Guardian Signature

Date

Off-Site Permission:

We, the undersigned parent(s) or legal guardian(s) for _____, give our permission for our child to participate in offsite events between April 1, 2010 to August 31, 2011.

We also give permission for any representative of Beulah Alliance Church to obtain any necessary medical treatment as needed while offsite. We assume responsibility for any medical bills incurred and should our child have to return home before the group for medical or disciplinary reason, we also hereby assume any cost incurred.

We give authorization for the previously mentioned to provide all necessary food, transportation, and lodging as applicable.

We do hereby release, forever discharge and agree to hold harmless, Beulah Alliance Church and Pastor Chet Kennedy, Denise Lang, Ryan Tuck and the representatives thereof from any and all liability claims, or demands for personal injury, sickness, or death, as well as property damage and expenses of any nature whatsoever which may be incurred by my child in the course of participation in the aforementioned. Furthermore, we agree to assume all responsibility for any of the previously mentioned occurrences.

Parent/Legal Guardian Signature

Date

Parent/Legal Guardian Signature

Date

Emergency Contact Name

Doctor's Name

Emergency Contact Phone Number

Doctor's Phone Number