

# H2H Confirmation 2017-2018

## (6th—8th Grade)

### Registration Form

Name \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

Home phone number \_\_\_\_\_ Cell phone \_\_\_\_\_

Parent's names \_\_\_\_\_

Parent E-mail address \_\_\_\_\_

Student E-mail address \_\_\_\_\_

Emergency contact name \_\_\_\_\_

Emergency contact phone number \_\_\_\_\_

Allergies \_\_\_\_\_

Waiver: I authorize the above child(ren) to participate in H2H Confirmation at Hope Lutheran Church. I authorize emergency medical treatment for the above child(ren) provided that I cannot be reached. I give permission for the above child(ren) to be videotaped/photographed for Hope Lutheran Church to use in their brochures, newsletters, worship presentation and media communication (i.e. Hope's website and Facebook page). By signing, you accept this waiver.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

We, the undersigned, agree to abide by the rules of Hope Lutheran Church. The students will respect the pastor, staff, volunteers, other students, as well as the building and property of our church. We understand that if there is misbehavior, there will be one verbal warning, a second offense will result in a phone call from the pastor to the parents. A third offense will require a conversation with the pastor. Parents may be asked to attend class with their child, or possibly teach their child at home. It is a privilege to participate in H2H at Hope Lutheran Church, and everyone is expected to behave accordingly.

Student \_\_\_\_\_ Parent \_\_\_\_\_

**\*\*\* Please include the registration fee of \$20 per student to cover the cost of supplies. The registration fee will be waived for students whose parents serve as group leaders or on the planning team for fellowship and service activities. Make check payable to Hope Lutheran Church. Thank you for your support! \*\*\***

Office Use Only	Date Received _____	Fee: \$ _____	Cash _____	Check _____
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