

Bethesda Presbyterian Church  
EPIC Youth Registration Form

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Name you like to be called: \_\_\_\_\_ Birthday \_\_\_\_\_

Returning Youth  New Youth Member  
(Returning Youth Should Fill Out any information below that has changed since last year...)

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Youth Cellphone \_\_\_\_\_

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

School Attending \_\_\_\_\_ Grade Level \_\_\_\_\_

Father/ Guardian Name \_\_\_\_\_

Father email: \_\_\_\_\_ Father cell: \_\_\_\_\_

Mother / Guardian Name \_\_\_\_\_

Mother email: \_\_\_\_\_ Mother cell: \_\_\_\_\_

My favorite youth activities are: \_\_\_\_\_

My least favorite youth activities are: \_\_\_\_\_

My Favorite youth games are: \_\_\_\_\_

Our Family will be happy to provide Dinner for youth one night.  Yes,  No

We can chaperone and drive on special youth events.  Yes,  No

Other Information Youth Leaders Should Know about my Child!

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