

Trinity Episcopal Cathedral

Parent Information

Student(s) in EYC:

Name: _____ Grade: _____

Name: _____ Grade: _____

Mom's Information
Name: _____
Home Phone: _____
Cell Phone: _____
E-Mail: _____
Occupation: _____
Skills that could benefit the youth ministry
Program: _____

Dad's Information
Name: _____
Home Phone: _____
Cell Phone: _____
E-Mail: _____
Occupation: _____
Skills that could benefit the youth ministry
Program: _____

We have the following resources that we would willing to share with the youth ministry department:

___ House for meetings ___ Pool ___ Vacation House (Type: _____ Sleeps: _____)

___ Large Vehicle (type: _____) ___ Boat (Type: _____ Locations: _____)

___ Other _____

Mom can be called to help with...
___ EYC Sign-in Table
___ Planning Committee
___ Special Events
___ Driving
___ Overnight Supervision
___ Data Entry
___ Cooking/Baking
___ Arts and Crafts
___ Event Set-up/Clean-up
___ Light Construction
___ Other _____

Comments: _____

<input type="checkbox"/> <i>Please call us regarding:</i>

Dad can be called to help with...
___ EYC Sign-in Table
___ Planning Committee
___ Special Events
___ Driving
___ Overnight Supervision
___ Data Entry
___ Cooking/Baking
___ Arts and Crafts
___ Event Set-up/Clean-up
___ Light Construction
___ Other _____
