

The Congregational Church in South Glastonbury
2021-22 Registration
Wednesday School (9-12) and Youth Mission (7-12)

____ Both Programs ____ Wednesday School Only (9-12) ____ YM Only (7-12)

Student's Name: _____

Nickname or preferred name: _____

School Attending: _____ Grade: _____

Student Residence Address: _____

Student email address (optional): _____

Legal Guardian's Name(s): _____

Legal Guardian Email(s):

Legal Guardian Preferred Phone (#1): _____ Phone (#2): _____

Emergency contact name _____ Phone _____

Please fill out the rest of this form completely - A new form for each child is needed each year! Return Options:

- Mail to South Church, P.O. Box 187, So. Glastonbury CT 06073, Attn: Rev. Forsythe
- Email to larissaforsythe@southchurch2.org for (9-12)
- Email to snyderjsd@gmail.com for (7-8)
- Bring to Wednesday School on 9/15/2021 or YM Kickoff on 9/19/2021

Student Release Section

I (We) _____ (print names)
give permission for my (our) child _____
to participate in South Church youth activities affiliated with the ____ (initial)
Wednesday School and/or ____ (initial) Youth Mission program(s). I (We) also release
from any liability the Congregational Church in South Glastonbury, the ministerial staff
and all adult advisors in the event of unforeseen/ unpreventable accidents or mishaps
during regular onsite activities. I understand that my child will need to have a signed
permission form for all off site/special activities as they occur. Further, I understand
that it is the responsibility of my child to recognize the importance of caring for self
and others during the COVID-19 pandemic by following church safety protocols guided
by the State of Connecticut and the CDC.

Signature of Legal Guardian(s): _____ date _____

Signature of Legal Guardian(s): _____ date _____

Photo/Video Release: Please check all applicable items and sign below to grant
permission to CCSG to use photos/videos of your child taken by staff or volunteers
during church sponsored activities for church purposes as described here. You will be
contacted for special permission should a photo/video be considered for use other
than as described here. Permissions can be changed at any time by sending an updated
form to the church office.

_____ I consent to having **photographs** of my child used on the church website,
newspapers, or printed materials.

_____ I consent to having my child's _____ **voice only**, _____ **voice and video** be
used in online worship, virtual choir, or any other church-sponsored videos that will be
posted on the church's streaming platforms (Zoom, Youtube, Facebook Live).

**In case of an emergency and while my student is in the care of South Church
Advisors / Teachers, they may use this information if I cannot be reached and my
emergency contact cannot be reached.**

Insurance Co. and Policy No.: _____

Date of Most Recent Tetanus Shot _____

COVID Vaccination Status (circle one): Unvaccinated / Partially/ Fully

Medications my (our) child is taking _____

Other medical conditions/allergies/diet restrictions/important information or special
needs: _____

South Church Youth in Mission Program Covenant

YM is a year-long program and is open to all interested students in grades 7-12. One component of the program is a mission immersion experience, i.e. Mission Trip. The Mission Trips entail a significant commitment on the part of students, parents, and adult advisors. Students demonstrate a strong desire to participate in the Mission Trips by participating in service projects, fundraisers, and fellowship opportunities throughout the year.

Our goals for **YM** are:

- Provide fellowship opportunities
- Engage our youth in meaningful exploration of their own gifts
- Enrich their experience of Christian community and service
- Engage our youth in meaningful experiences of being called into the world

As a youth participant:

- I believe in the goals for the YM program and would like to fully participate this year.
- My desire is to share my gifts and abilities with the community we are building and those we serve.
- I understand that if my goal is to participate in the year-end mission trip, I will need to demonstrate my desire through attending regular meetings and participating in a minimum of 2 Fundraiser and 2 Service projects (2+2) and will be responsible for tracking my progress during the year.
- I am aware that the Youth Mission Trip Advisors, YM Support Team, and my ministers are available to support me and to answer my questions at any time.
- I acknowledge that it is my responsibility to recognize the importance of caring for self and others during the COVID-19 pandemic by following church safety protocols put forth by the State of Connecticut and the CDC. I acknowledge that I have read and support church safety protocols.

As a Parent/Legal Guardian:

- I believe in the goals for the YM program and would like my child to fully participate this year.
- I will support YM fundraisers and service projects by participating in or helping to organize at least two (+2) events or activities.
- I will help my child meet their goals of meeting attendance and 2+2 participation.
- I acknowledge that it is my responsibility to support my child in recognizing the importance of caring for self and others during the COVID-19 pandemic by following church safety protocols put forth by the State of Connecticut and the CDC. I acknowledge that I have read and support church safety protocols.

Student signature _____ Date _____

Legal Guardian signature _____ Date _____