



All Saints' Parish 2011-2012

Registration for Youth and Family Ministries Ages 0 - 18

MAIL THIS FORM TO ASBH YOUTH AND FAMILY MINISTRIES, 504 NORTH CAMDEN DRIVE, BEVERLY HILLS, CA 90210 OR FAX TO 310-858-4538



This registration form enables us to maintain accurate information on your child and family. It also serves as a medical emergency & disaster information card for your child. Please complete a registration form for EACH of your children who participate in the Nursery (0-18 mos), Toddler Room (18 months - 3 yrs), Children's Ministry (3 -11 yrs), Youth Ministry (6th-12th grade) and All Saints' Choristers (8yrs+). For security, you must register your children prior to entry into the programs.\* (PLEASE PRINT LEGIBLY)

(EARLY REGISTRATION FOR CHILDREN'S MINISTRY WILL INSURE YOUR CHILD A PLACE DURING YOUR PREFERRED SERVICE TIME.)

\*Note - no child can be left in program or ministry rooms without completion and submission of this form.

(The 1st and 2nd pages of this form may also be used by adult participants in youth overnights, trips, pilgrimages and events, to provide emergency contacts, medical records and liability release information.)

Child/Participant's Name \_\_\_\_\_ Today's Date \_\_\_\_\_

Nickname/Preferred Name \_\_\_\_\_ M or F (circle one)

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Child's E-mail \_\_\_\_\_

Child's grade in Fall '11 \_\_\_\_\_ School \_\_\_\_\_

We plan to attend church on Sundays at: ( ) 9:00am ( ) 10:15 am ( ) 11:15am

Mailing Address \_\_\_\_\_ (City) \_\_\_\_\_ (Zip) \_\_\_\_\_

Parent #1 Name \_\_\_\_\_ E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

Parent #2 Name \_\_\_\_\_ E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

Name & address to whom mail is sent (if different) \_\_\_\_\_

May we share your contact info with other All Saints' parents? (check indicates "yes") ( ) Address ( ) Phone ( ) E-mail

Is child baptized? ( ) Yes ( ) No My child may participate in Eucharist. ( ) Yes ( ) No

Are parents members of All Saints'? Parent #1 ( ) Yes ( ) No Parent #2 ( ) Yes ( ) No

Are parents baptized? Parent #1 ( ) Yes ( ) No Parent #2 ( ) Yes ( ) No

( ) I would like more information on Baptism.

( ) I would like more information on Confirmation. (Preparation begins in 6th grade)

( ) I would like more information on Church Membership.

Is there anything special we should know about your child to make his/her experience the best it can be? \_\_\_\_\_

Would you like a meeting with your child's class facilitator, youth sponsor or Family Ministry team member to discuss his/her learning style, particular needs, or for more information about our program? ( ) Yes ( ) No

I ( ) do ( ) do not give my permission for the abovenamed Minor's photograph to be on the church website, in church publications, or in the youth ministry annual video/slideshow.

EMERGENCY AND MEDICAL INFORMATION

For the security of your child, emergency registration requires more detailed medical information. This registration is valid for the entire program year unless your child's information changes. Once this form is completed and submitted, parents and guardians will only need to sign permission slips and for registrations for specific trips and outings.

Name: \_\_\_\_\_ Age/Grade: \_\_\_\_\_

Current Medications \_\_\_\_\_ Allergies to Drugs or Food \_\_\_\_\_

Other Health Information \_\_\_\_\_

Hair color \_\_\_\_\_ Eye color \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Any history of altitude or motion sickness? ( )Yes ( )No

Operations or major illnesses \_\_\_\_\_

Describe any medical, physical or behavioral conditions that may affect or limit full participation in youth programs: \_\_\_\_\_

Table with 4 columns: Disease, Date of Vaccine, Date of Booster, Date of Vaccine, Date of Booster. Rows include Measles, Mumps, Tetanus Booster, Rubella, Chicken Pox, Hepatitis B\*.

(\*not required but strongly encouraged)

Name of Physician \_\_\_\_\_ Phone \_\_\_\_\_

Medical Insurance Company \_\_\_\_\_ Phone \_\_\_\_\_

Medical Insurance Policy # \_\_\_\_\_ Ins. Company Address \_\_\_\_\_

Alternative Emergency Contact

If parents can't be reached, All Saints' is authorized to release child to the following:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile/Work Phone \_\_\_\_\_

Out-of-State Emergency Contact

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile/Work Phone \_\_\_\_\_

TERMS: I verify that the medical information given on this form is up-to-date and accurate. I understand that should this information change, it is my responsibility to update or amend any records pertaining to my child/teen. In addition, I understand that a separate permission slip or registration will need to be signed and submitted for any overnight program, day camp, special activity, trip or event that differs from our normal weekly gatherings.

MEDICAL RELEASE AND AUTHORIZATION: In case of emergency, I understand that every effort will be made to contact me or the emergency contact listed on the front of this form. In the event that I cannot be reached during any medical emergency or following a traumatic accident, I hereby give permission to the licensed physician selected by church leaders (or their agents) to act on my behalf by securing proper treatment, including but not limited to x-ray examinations, medical or surgical diagnosis and procedures, anesthesia, hospitalization, surgery or injections of medication for my child. This authorization is given in advance of any specific diagnosis, treatment or hospital care required, but it is given to provide authority and power to render care which is deemed advisable in the best judgment of the physician. I also request and authorize the release of all medical records. Such medical records include x-rays, notes, prescriptions and all information pertaining to the treatment of my child while under the care of All Saints' Episcopal Church and its agents.

LIABILITY RELEASE: In accordance with the permission I am granting, I hereby agree to indemnify and hold All Saints' Parish, Beverly Hills, California its vestry, clergy, employees, agents and representatives (collectively, the "Church") harmless from any and all liability as a result of being injured while participating in said activity. I hereby accept any and all injury and damage to my person or dependent children that might arise directly or indirectly as a result of participation in any All Saints' activities. I hereby expressly release, discharge and hold harmless from any liability whatsoever All Saints' Parish all employees, volunteers and agents in their capacities as representatives of All Saints' Parish. I certify I am familiar with the contents of this release. I have read and understand and it is my intention that by signing this that the same be binding on me and my heirs, administrators, executors and assignees.

Parent/Adult's Name (please print) \_\_\_\_\_

Parent/Adult's Signature: \_\_\_\_\_ Date \_\_\_\_\_

“NOW THE BODY IS NOT MADE UP OF ONE PART, BUT MANY... GOD HAS ARRANGED THE PARTS IN THE BODY, EVERY ONE OF THEM, JUST AS HE WANTED THEM TO BE.” (1 CORINTHIANS 12:14, 18)

All Saints' Family Ministries relies on the support of parents. We need each family's involvement in these ministries. Please choose at least ONE way you can participate in the coming year. Thank You!

### **FAMILY MINISTRIES**

- Send birthday cards to the kids (± five cards/week). We'll provide the supplies. You just put them in the mail!
- Assist with All-Parish Events:
  - Picnic: Sept. 18    Christmas Pageant: Dec. 24    Pancake Supper: Feb. 21    Easter Egg Hunt: Apr. 8
- Administrative Support. Spend a few hours during the week helping with data management, mailings, phone calls, etc.

### **INFANTS & TODDLERS (TINY CHURCH)**

- Assemble gift bags for newborn babies and children's baptisms. We provide the supplies. You assemble ±12 bags.
- Volunteer in the Toddler Room (Once or twice/month at 9:00, 10:15 or 11:15 a.m. service). Play with the kids. Greet new families. Lead circle time.
- Spend an hour straightening up the toddler/infant room(s): organizing supplies, cleaning toys (once/month commitment).

### **CHILDREN'S MINISTRY (ALL SAINTS' KIDS PROGRAM)**

- Join the team of artists and carpenters who build and repair the many materials necessary for Godly Play.
- Assist in putting the materials in perfect order to greet our children on Sunday morning.
- Prepare a meal for a Godly Play Training.
- Help coordinate and attend Kid's Retreats, Events and Outreach Opportunities.
- Assist with Family Fellowship Events.
- Help organize and coordinate Children's Ministry Summer Sundays.

### **CHORISTERS**

- Help serve dinner during a weekly Thursday evening rehearsal.
- Supervise children in the playground after a Chorister rehearsal until parents arrive to pick them up.

### **YOUTH MINISTRY: THE COMMUNITY OF ALL SAINTS' TEENS (THE C.A.S.T.)**

- Spend an hour straightening up the youth room and office.
- Donate snacks and simple meals for our weekly gatherings, overnights, retreats and mission trips.
- Drive carpool to various events such as bowling, movie outings, One Voice, church visits, etc.
- Host a CAST party (i.e. Superbowl, Oscars, Pool Party). Some of the best CAST moments take place in someone's home!
- Help with administrative mailings and communications to the CAST mailing list.
- Help facilitate and lead CAST overnights such as the Winter Lock-In and 30 Hour Famine.
- Assist with CAST big events: Silent Auction Fundraiser, End-of-Year Awards Banquet, Alternative Advent Market
- Set up, man, and host CAST Sunday morning tables. (i.e. Mother's Day, Father's Day, Auction Publicity, Alternative Advent Market)
- Help coordinate CAST outreach opportunities. (i.e. Food on Foot, One Voice, Petwash, 30-Hour Famine, Alternative Advent Market)
- Help chaperone and attend the yearly mission trip to Navajoland or bi-yearly Pilgrimage to Taizé.
- Facilitate and lead youth ministry Sunday mornings (i.e. help coordinate a lesson and craft) on Sundays when youth leaders are away (retreat weekends, mission trip week, holidays, Gospel Brunch outing Sunday)



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phone: 310-275-0123    fax: 310-858-4538    The Rev. Stephen Huber, Rector



All Saints' Parish  
Youth and Family Ministries



## All Saints' Parish Youth & Family Ministries

All saints' vision: A world transformed by Jesus  
All saints' mission: To become disciples who make  
disciples through Christ.

### Guiding Principles

The themes we seek to teach to all kids as they move from the infant and toddler ministry to children's ministry to youth ministry are:

1. God's love for you is unconditional and endless - YOU matter to God!
2. God embraces you every moment of every day.
3. God blesses you with special gifts.
4. God wants us to recognize the face of Christ in others.
5. God empowers us to use our gifts as difference-makers in His Kingdom.