

CONGREGATION SHALOM'S YOUTH GROUPS (GRADES 3-12)

REGISTRATION FORM 2009-2010

GERI BERG – SHFTY ADVISOR
HERSCHEL & MAUREEN KRUGER – SPFY ADVISOR
GERI BERG – CLUB 56 ADVISOR
BRAD & BECKY DALLET – CLUB 34 ADVISORS

Student's Name: _____ Phone: _____

Address: _____ Birthday: _____ Grade in Fall: _____

Student's Cell Phone: _____ Student's E-Mail: _____

Parents: _____ Home# _____ Work# _____

Parent's Email _____

Members of Shalom? (Yes/No) _____ If not, where? _____

MEDICAL INFORMATION AND RELEASE: (Kept on file the entire year) Date: _____

The undersigned parent(s) of _____, hereby consent to the child's participation in Congregation Shalom's Youth Groups. In consideration of Shalom's acceptance of the child as a participant in this Group, I both individually and as the legal guardian of the child, hereby waive any and all claims against Shalom, its agents and its employees, that may arise out of any injury, loss or damage, suffered by the child during the activity as a result of his/her leaving the group without authorization or failing to follow any of the other youth group rules which have been explained to the child. I hereby authorize shalom and its employees and agents to act as my agent to consent to or arrange for any emergency medical treatment that may be deemed necessary by an attending physician with respect to any illness or injury suffered by the child on an activity.

Signed: _____ Relationship: _____

In Case of Emergency, please contact:

_____ Home# _____ Work# _____ Cell# _____
Name

_____ Home# _____ Work# _____ Cell# _____
Name

Insurance Carrier: _____ Policy # _____

Insurance Carrier Phone # _____ Insured's Name _____

Other medical information _____

DUES STRUCTURE:

SHFTY (grades 9-12) \$25 (\$35 for non-Shalom members)

SPFY (grades 7-8) \$15 (\$25 for non-Shalom members)

CLUB 56 (grades 5-6) \$15 (\$25 for non-Shalom members)

CLUB 34 (grades 3-4) \$5 (\$10 for non-Shalom members)

PLEASE TURN OVER AND FILL OUT BACK SIDE

PARENTAL ASSISTANCE

Parents of student involved in Youth Group at Shalom are sometimes needed to help with activities. If any parent has access or connections to a summer cottage, boat, mini-van, etc. that could be used for a youth group activity, please share that information with us.

YOUTH PARTICIPANT INTEREST LIST (please circle all that are of interest to you)

Sports Movies Services Trips Games Hang-Out Nights
Discussion Groups Arts/Crafts Music Dance Holidays
Social Action Projects Leadership Position in the Youth Group
Other: _____

CONDUCT

ALL STUDENTS participating in ANY youth group event under the auspices of Congregation Shalom are expected to abide by all local, state, and federal laws.

Temple property is not to be abused.

Leaving a youth program without permission of the Advisors is strictly prohibited.

No drugs, cigarettes or alcohol are permitted at any youth group activities.

Violation of any of these rules and/or laws may result in suspension from future youth group events.

Good behavior is expected from each participant at all events. Repeated instances of misconduct shall result in the participant being excluded from future events.

PARENT SIGNATURE: _____ **Date:** _____

MEMBER’S SIGNATURE: _____ **Date:** _____

Please mail form and check to

Shalom Youth Groups • 7630 N. Santa Monica Blvd. • Milwaukee • WI • 53217