



Gulf Breeze United Methodist Church

Student Ministry Registration Form

Complete the information below, seal money inside envelope, attach and return to the Student Ministry Office or Church Welcome Desk.

Date: ___/___/___ Activity / Event: "The Walk" Missions Monday

Name: _____ Home Phone: _____

Email: _____ Age: _____ Grade: _____

Address: _____ City: _____ State: _____ Zip: _____

Medical Release on file yes _____ no _____ if yes, has any medical / insurance information changed?

Please list any changes: _____

Circle One: Male Female Parent/Guardian Names: _____

Wk. Phone: _____ Cell Phone: _____

Parental Consent

Yes, I _____ will allow my son/daughter
(print name)

_____ to attend this event.
(print name)

Parent's Signature: _____

Missions Monday Calendar

Sixth Grade

January 12th
February 2nd
March 9th
April 6th
May 4th

Seventh Grade

January 26th
February 23rd
March 30th
April 27th
May 18th

Eighth Grade

January 26th
February 9th
March 16th
April 20th
May 11th