

# Student Data Form 2007/8

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_ Birth date: \_\_\_\_\_

Baptized Date and place: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

School Activities: \_\_\_\_\_

Small Groups: \_\_\_\_\_

Sports & Hobbies: \_\_\_\_\_

Favorite Church Activity: \_\_\_\_\_

Please look below and circle any that interest you:

Confirmation Class at 9:15 (7<sup>th</sup>-9<sup>th</sup> grades)

Youth Sunday school at 10:45 – 11:45

Wednesday evening middle school youth group, 6:45- 8:00

Sunday evening senior high youth group from 6-8 pm

Juice Box – (Youth Praise Band)

Body and Soul for middle school girls

Body and Soul for senior high girls

Dinners for 8 (senior high)

Primary Guardian Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Emergency Number: \_\_\_\_\_

Home Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_