## HOSANNA! YOUTH MINISTRIES MIDDLE SCHOOL (GRADE 6-8) STUDENT REGISTRATION FORM



## Option A: In Person

In this selection, students will attend Velocity on a weekly basis – outside until further notice. Six-foot social distancing between family groups will be practiced and masks are optional as long as we're outdoors following health and safety protocols. As well, small group discussions will be included.

## Option B: At Home Velocity With this choice, students will interact with Velocity materials at home. Families will receive materials on Wednesday (select postal mail or e-mail below) that are designed for parents/guardians to facilitate any activities and discussion questions, along with an opportunity for personal reflection by the student.

STUDENT NAME:		DIFFERENT MANAGE REFORMS AND MANAGE REFORM AND MANAGE REFORMS AND MANAGE REFORM AND MANA
[IF STUDENT PRE	FERS TO BE CALLED BY A	DIFFERENT NAME, PLEASE LET US KNOW]
AGE:	BIRTHDAY:	GRADE:
SCHOOL:		ACTIVITIES/INTERESTS:
STUDENT EMAIL:	<b>:</b>	STUDENT CELL PHONE:
YES, PLEASE	SEND MY STUDENT PERIO	ODIC VELOCITY STUDENT TEXT MESSAGE UPDATES
FAMILY ADDRES	S:	
CITY/ZIP:		
PARENT/GUARD	IAN NAME(S):	
PARENT/GUARD	IAN EMAIL:	
PARENT/GUARD	IAN PREFERRED PHONE	NUMBER:
YES, PLEASE	SEND PERIODIC VELOCITY	Y PARENT/GUARDIAN TEXT MESSAGE UPDATES
YES, PLEASE	SEND MONTHLY VELOCIT	TY PARENT/GUARDIAN EMAIL UPDATES
Hosanna! has my	y permission to use my c	hild's picture for publications which may include multi-media productions,
displays at churc	h, our website and/or Fa	acebook: Yes No
		concerns (such as recent death or illness in the family, recent move, etc.) learning difficulties or food allergies?
/es	No	If "Yes" please indicate specifics in area below.
Please be aware	of the following special c	ircumstances for this child: Child's Name(s)
Circumstances		
Signature of Pare		Date: