

BMPC Youth Registration 6th - 12th grade



Name _____

Female Male

Baptized? Yes No

Birth Date _____

Grade _____

Parent(s) Name _____

Member? Yes No Regular Visitor? Yes No

Youth Email address _____

Parent(s) email address _____

Address _____

Home Phone# _____

Parent Cell # _____

Youth Cell # _____

School currently attending _____



BRYN MAWR PRESBYTERIAN CHURCH

625 Montgomery Avenue | Bryn Mawr, Pennsylvania, 19010 | 610-525-2821 | Fax: 610-525-9476

IMAGE/NAME PERMISSION & RELEASE

Bryn Mawr Presbyterian Church staff members may wish to photograph, videotape, or otherwise record the activities of the Program participants for the purpose of promoting the Program. We may also publish your participant's name, grade, and image on Church related publications. I give permission for my child in the Program to be videotaped, photographed, and/or recorded, in connection with the Program. I give permission for Bryn Mawr Presbyterian Church to use said videotaped, photographed, and/or recorded materials in BMPC publications, websites, CD's, DVD's or other media, for publicity purposes or in any other non-commercial manner that it chooses. I hereby waive and release any rights that I may have to said videotaped, photographed, and/or recorded materials.

Child's Name (please print) _____

Parent/Guardian Name (please print) _____

Parent/Guardian Signature _____ Date _____