



CHURCH OF THE  
**APOSTLES**  
EASTERN SHORE

**STUDENT MINISTRY FAMILY INFORMATION FORM 22-23**

PARENT/GUARDIAN NAME(S): \_\_\_\_\_

PARENT/GUARDIAN EMAIL: \_\_\_\_\_

PARENT/GUARDIAN PHONE: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ GENDER \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_ BAPTIZED? \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SOCIAL MEDIA USERNAMES: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ GENDER \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SOCIAL MEDIA USERNAMES:  
\_\_\_\_\_

STUDENT NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ GENDER \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SOCIAL MEDIA USERNAMES:  
\_\_\_\_\_

**FOR STUDENT(S):**

**WHAT ARE YOUR HOBBIES OR INTERESTS? WHAT DO YOU LIKE TO DO FOR FUN?**

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**WHAT ARE ONE OR TWO ACTIVITIES THAT FR. TAYLOR/ SM TEAM COULD ATTEND TO SUPPORT YOU?**

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**I AM INTERESTED IN HELPING LEAD (CIRCLE ONE OR TWO)**

<b>SET UP/TEAR DOWN</b>	<b>MUSIC</b>	<b>FOOD</b>	<b>GAMES</b>
<b>BIBLE STUDY</b>	<b>EVENT PLANNING</b>	<b>OTHER</b> _____	

**WHY?**

**FOR PARENT/GUARDIAN:**

**ANYTHING I NEED TO KNOW ABOUT YOUR STUDENT(S) OR FAMILY? (ALLERGIES, MEDICAL CONDITIONS)**

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**HOW CAN YOU HELP? (CHECK ONE OR MORE)**

<input type="checkbox"/> CARPOOL FOR EVENTS (AS NEEDED)	<input type="checkbox"/> FOOD FOR EVENTS (AS NEEDED)
<input type="checkbox"/> HOST EVENTS (AS NEEDED)	<input type="checkbox"/> SET UP/TEAR DOWN FOR EVENTS (AS NEEDED)
<input type="checkbox"/> WEDNESDAY SMALL GROUP LEADER (WEEKLY)	<input type="checkbox"/> OTHER _____