

East Union Lutheran Church Confirmation Registration 2017/2018

"The whole being of any Christian is faith and love. Faith brings the person to God, love brings the person to people" -Martin Luther

Confirmation is designed to help students name and grow their unique, God-given gifts, with the invitation to use those gifts for service in the church and in the world. At your child's baptism, you said, "Yes, God!" on behalf of your child, welcoming them into the body of Christ forever. Confirmation is the opportunity for your child to grow, questions, and explore so he or she may make the decision to take ownership of his/her faith and continue to say, "Yes, God!"

The 2017/2018 Confirmation program will be for youth grades 6th through 9th. Classes will be held on Sundays from approximately 10:30 am to 12:00 pm. Confirmation classes are open to members and non-members alike.

The first day of Confirmation will begin on Sunday, September 17, with Rally Sunday.

Please bring this completed form to East Union Lutheran Church on or before September 3, 2017. You may also email the completed form to eastunionlc@gmail.com or mail it to:

> East Union Lutheran Church 15180 County Road 40 Carver, MN 55315

Please contact the Youth & Education Committee if you have any questions, concerns, or suggestions. We welcome and appreciate all ideas and assistance.

God bless you and your family!

Are you members of East Union Lutheran Church?_____ Are you interested in learning more about becoming members (Y or N)?

Student's name:	Student's name:			
Birthdate:Age/grade:	Birthdate:Age/grade:			
Baptized? (Y or N)	Baptized? (Y or N)			
Please list any allergies, dietary or special needs:	Please list any allergies, dietary or special needs:			
Student's name:	Student's name:			
Birthdate:Age/grade:	Birthdate:Age/grade:			
Baptized? (Y or N)	Baptized? (Y or N)			
Please list any allergies, dietary or special	Please list any allergies, dietary or special			
needs:	needs:			
Name of parent(s) or adult contact:				
Address:				
Telephone:Email:Email:				
Name of parent(s) or adult contact:				
Address:				
Telephone:Email:				

Volunteers/helpers needed

Our Confirmation Program is in need of volunteer helpers in the following areas. Please check your area of interest.

🗌 Confirn	nation tea	cher (ev	ery other	Sunday)
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An extra pair of hands when needed

Other?_____

Consent to use photos or video for Sunday school/church purpose

__yes __no

Signature:___

East Union Lutheran Church Accident Waiver and Release of Liability

Should my child require immediate or emergency medical care while engaged in an activity sponsored by East Union Lutheran Church, in my absence, I hereby grant East Union Lutheran Church authority to release my child for medical treatment to such medical personnel as East Union Lutheran Church determines appropriate under the circumstances.

In consideration for the privilege of allowing my child to participate in the above-named activity, I agree to release and hold harmless East Union Lutheran Church, its officers and agents, from any liability to or responsibility for bodily injury, damage or illness to the above-identified child while participating in any youth athletic or social activity which may be directly or indirectly sponsored by East Union Lutheran Church. Further, I agree to indemnify and hold harmless East Union Lutheran Church, its officers and agents with respect to any claim asserted by or on behalf of my child as a result of bodily injury, illness or damage.

Please read carefully, this permission slip is a legal document which includes release of liability and indemnification.

Date	Signature of Parent or Legal Guardian	
Emergency Contact:		
Emergency Phone Numb		
Second Emergency Conta	act:	
0 0	act Phone Number:	