



FIRE Student Intake 2025/2026

Please complete the following information for our records. This helps us stay connected.

Student Information

- Full Name: _____
- Preferred Name/Nickname: _____
- Date of Birth: _____
- Student's Baptism date _____
- Baptism Place: _____
- Grade in School (Fall 2025): _____
- School Attending: _____

Parent/Guardian Information

- Parent/Guardian Name(s): _____
- Primary Phone Number: _____
- Email Address(es): _____
- Mailing Address: _____
- Youth is in the custody of: Both Parents Mother Father Other

MEDICAL INFORMATION STATEMENT

In case of emergency, I understand that every effort will be made to contact me. If I cannot be reached, I hereby give Bethel Lutheran Church of Rochester, Minnesota permission to act in my behalf in seeking emergency treatment for my child in the event such treatment is deemed necessary. I absolve Bethel Lutheran Church from liability in acting on my behalf in this regard. This covers activities while class is in session, as well as optional activities in Bethel Hall and Youth Hall outside of class.

Emergency Contact (Other than Parent/Guardian)

- Name: _____
- Relationship to Student: _____
- Phone Number: _____
- Doctor's name & Insurance Company: _____
- Does the student have any allergies or medical concerns we should be aware of?
- Yes No

If yes, please describe:

- Anything else you'd like us to know?

I have read and I understand the above Medical Information Statement.

Parent/Guardian Name:

Date: _____

I give permission to Bethel Lutheran Church of Rochester, MN to take **pictures and/or video** of my youth during Confirmation. These pictures or videos may be used for promotional purposes which may include posting on Bethel's CYF website/Facebook page. Please note: Youth will not be identified by name.

_____ Yes

_____ No, I would prefer my youth not be in pictures for promotional use.

Confirmation registration fee (curriculum) of \$50 is enclosed?
(checks payable to Bethel Lutheran Church)

_____ **YES**

_____ **NO**

7th Grade Small Group Placement

As I begin organizing small groups for the upcoming year, I would like to place your student with a friend. I will do my best to accommodate requests so your student feels connected and comfortable from the start.

Please write down the name of a friend they'd enjoy being grouped with:
