

SECTION ONE: STUDENT'S NAME

NAME: _____ GRADE: _____ SCHOOL: _____
 NAME: _____ GRADE: _____ SCHOOL: _____
 NAME: _____ GRADE: _____ SCHOOL: _____

SECTION TWO: PERSONAL INFORMATION

FATHER/STEP NAME: _____ MOTHER/STEP NAME: _____
 ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
 HIS PHONE: (Home) _____ (Work) _____ (Cell) _____
 HER PHONE: (Home) _____ (Work) _____ (Cell) _____
 HIS EMAIL: _____ HER EMAIL: _____
 ANNIVERSARY: _____ HIS BIRTHDAY: _____ HER BIRTHDAY: _____

SECTION THREE: FINISH THE FOLLOWING SENTENCE

DAD'S FAVORITE...

SNACKS ARE: _____ FOODS ARE: _____
 ICE CREAM IS: _____ DRINK IS: _____ CANDY IS: _____

MOM'S FAVORITE...

SNACKS ARE: _____ FOODS ARE: _____
 ICE CREAM IS: _____ DRINK IS: _____ CANDY IS: _____

SECTION FOUR: WAYS YOU LIKE TO LEARN

<input type="checkbox"/> Work in groups or serve people	<input type="checkbox"/> Sing, Play, or Listen to Music
<input type="checkbox"/> Solve problems, questions, or reason	<input type="checkbox"/> Be out-of-doors, observe creation
<input type="checkbox"/> Do drama, sports, or dance	<input type="checkbox"/> Work alone or think deeply
<input type="checkbox"/> Draw or make design	<input type="checkbox"/> Write, speak, or read

SECTION FIVE: AVAILABLE RESOURCES FOR YOUTH ACTIVITIES

(Next to the checked item, please indicate how many people you can accommodate)

Van/SUV Jet Ski Boat Swimming Pool
 Tent home Cabin/Camp
 Other — Please Specify: _____

SECTION SIX: I WOULD BE WILLING TO...

<input type="checkbox"/> Photography	<input type="checkbox"/> Provide snacks/meal	<input type="checkbox"/> Video
<input type="checkbox"/> Transportation	<input type="checkbox"/> Art/Decorations	<input type="checkbox"/> Host a Fellowship in my Home
<input type="checkbox"/> Make Phone Calls	<input type="checkbox"/> Crowd Control	<input type="checkbox"/> Miscellaneous Administration
<input type="checkbox"/> Web Design	<input type="checkbox"/> Provide Scholarships	<input type="checkbox"/> Other: _____

SECTION SEVEN: LEADERSHIP

<input type="checkbox"/> Youth S. S. Teach/Substitute	<input type="checkbox"/> Bible Study Teacher	<input type="checkbox"/> Refreshment Coordinator
<input type="checkbox"/> Special Projects	<input type="checkbox"/> Chaperon/Driver	<input type="checkbox"/> Serve on a Lead-team
<input type="checkbox"/> Special Topic Speakers (Topic: _____)		
Worship Team: <input type="checkbox"/> Vocal <input type="checkbox"/> Instrumental <input type="checkbox"/> Drama		<input type="checkbox"/> Other: _____

SECTION EIGHT: I PLAN TO...

<input type="checkbox"/> Drive or Chaperon for Event	<input type="checkbox"/> Host a Home for Dnow	<input type="checkbox"/> Drive or Chaperon Mission Trip
<input type="checkbox"/> Participate in Parent Meetings	<input type="checkbox"/> Assist with REFUGE	<input type="checkbox"/> Assist with 5 th Quarters