

Welcome to Bethany Student Ministries!

Getting to Know Your Student

| Today's Date: | |
|--|-------------------------------------|
| Print Your Student's First and Last Name | |
| Child's birthday/ Grade: | School |
| Cell Phone: | |
| Tell us a little about your child: | |
| What are his/her interests (i.e. music, sports | ;, chess, etc): |
| Favorite Candy: | Do you have a pet? Y N What animal? |
| What should we know about your child? | |

| (please print) | | |
|-----------------|--------------|--|
| Parent 1: Name: | Cell Number: | |
| E-mail: | | |
| Parent 2: Name | Cell Number: | |
| E-mail: | | |

Opportunities to get involved:

Parent:

| #1 | #2 | |
|----|----|--|
| | | Snack Supper Help |
| | | Receive weekly What's UPdate from Student Ministries |
| | | Attend Mission Trips/Camp/Retreats |
| | | Weekly Mentor/Small Group Leader |
| | | Special Events help |
| | | Sunday School Teacher |
| | | Photographer |