

## Mater Christi Catholic Community

340 Yangebup Road, Yangebup 🕾: (08) 9417 4763 🛎: materchristi@westnet.com.au

## M Y - (Mater Youth Group) Sunday 6- 7:30 pm

**Registration Form** 

Child Details:	
Surname:	
First Name:	
Date of Birth:	
School Currently Attending:	
Any physical, education or medical problems? E.g. allergies, dyslexia, deaf	
Any dietary requirements	
Parent/ Guardian Details:	
Name and Surname:	
Address:	
Phone:	Homeor Work
	Mobile
Email:	
Emergency Contact Name, Number and Relation to Child(ren):	(MUST be available 6:00pm – 7:30pm)
Please list names and contact child(ren) from MY each fort	t numbers of authorised people who may collect your might.
I/We parent/guardian of in the event that I/we are uncontactable authorise my/our child to receive any emergency medical or dental attention should it be required.  I do/do not agree to photographs and short videos of activities including my child to be taken for use within the Church community and for possible publication including newspaper or internet.	
Signed	Date



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## M Y - (Mater Youth Group) $Duty\ Of\ Care\ Statement$

The Mater Christi Catholic Community has a Duty of Care to the youth attending M V -(Mater Youth) on advertised Sundays during the school term. The you

M Y – (Mater Youth) on advertised Sundays during the school term. The youth's			
safety and well-being are most important, and we seek your support and cooperation			
111	upholding our conditions of participation.		
We therefore advise you that:			
(Please initial in the column to confirm you have read and understood each condition)			
*	Gatherings commence 6:00pm and conclude 7:30pm		
*	Youth supervised only from 6:00pm to 7:30pm		
*	It is a <b>parental responsibility</b> to deliver teenager on time and sign them in		
*	It is a <b><u>parental responsibility</u></b> to collect teenager on time		
*	An older sibling of the child attending MY does not suffice as adequate		
	supervision or validate signing in participation (unless over 18 years old		
	and prior arrangements have been made).		
*	The signing of Attendance Form is used in the event of an emergency and		
	failure to sign this form may put your child(ren) at risk.		
*	If you are unable to collect your child(ren) you must nominate authorised		
	people on the Registration form. Youth Group Coordinators are not		
	permitted to release children to any unauthorised person.		
*	As a parent you are requested to support the group by putting your name		
	on a parent roster to supervise the teenagers during the gathering		
*	As a safety precaution we ask that the signage in the carpark be strictly		
	followed. No children should be unsupervised in the carpark.		
Our Youth Group Coordinators are well-trained volunteers who are from our Parish,			
Mater Christi. They all have families and/or other commitments prior to and after			
gathering each fortnight and are grateful for your and your children's			
respect/cooperation. Our primary focus is to create a safe and fun space of fellowship			
for our parish young people, to help them nourish their love for God and participate			
in (	our church community activities.		
m)			
Th	ank you in anticipation for your support and cooperation.		
T /T	A7.		
I/We parent/guardian of have read,			
initialed and understand the conditions of my child(ren) participating in the Mater Christi Youth Group – MY gatherings.			
Christi Touth Group - MT gatherings.			
Sig	nedDate		
Sig	neu Date		