

# T.A.R.G.E.T. 2012 ENROLLMENT FORM

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Dear Parent or Guardian:

In our continuing effort to provide a quality ministry program for your teen, we require that all teens wishing to participate in T.A.R.G.E.T. on Wednesday evenings at Addyston Baptist Church complete this enrollment form. There is no cost for the program; however, this form will assist us in record keeping and provide accurate contact information in case of an emergency. Please note that we must return your teen to the same address where he or she was picked up. If you have any questions or concerns or if you would like to better understand our rules and procedures, please call Bro. Russ McCord at 941-4897. Thank you for your cooperation.

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Teen's Name \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_

Address \_\_\_\_\_ P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone # \_\_\_\_\_ Emergency Phone # \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Medical Conditions or Concerns \_\_\_\_\_

Parent or Guardian \_\_\_\_\_

I give permission for my teen to attend the T.A.R.G.E.T. Wednesday evening program at Addyston Baptist Church. I understand there is no cost for enrollment. My teen will strive to follow the rules of T.A.R.G.E.T. I give permission for my teen to ride church transportation to and from church, if necessary. I understand that my teen must be returned to the address where he or she was picked up.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Teen Signature \_\_\_\_\_ Date \_\_\_\_\_