

the Church
Higher Ground Information/Registration 2014-2015

Name: _____ Nickname _____

Please circle: MALE FEMALE Birthdate _____ Age _____

Parent's Name(s): _____

Your address: _____ city _____ zip _____

Parent cell (s): _____

Home phone number _____ Student's cell _____

Can we add you to our text message system? This will be used for updates, encouragement and devo ideas, approximately 2-3 times per week. (Circle One)
Parents: YES NO Student: YES NO

Student's e-mail: _____

Parent's e-mail: _____

Have you been baptized? YES NO Have you completed First Communion? YES NO

Do you have a church you regularly attend? YES NO What church?: _____

Are you currently connected to a Higher Ground lifeGroup? YES NO

If yes, which lifeGroup do you attend? _____

School you attend: _____ Grade: _____

School Activities: _____

Hobbies or things you like: _____

Where do you work? _____

Name 3 strengths that you have: _____

Important stuff we should know about you: _____
