



**Unitarian Universalist Fellowship of Raleigh  
Youth Religious Education--2007-2008 REGISTRATION**



Parent Information (Please print clearly and include full mailing address.)

FIRST PARENT NAME		SECOND PARENT NAME	
STREET ADDRESS			ZIP CODE
CITY	HOME PHONE	WORK PHONE	CELL PHONE
FIRST PARENT EMAIL		SECOND PARENT EMAIL	

**Child #1**

Last Name:	First Name	Gender:	Birthdate:	Age (as of 9/1/07):
School:	Grade (as of 9/1/07):	Email:	Allergies:	Did you fill out a special needs form*?

**Child #2**

Last Name:	First Name	Gender:	Birthdate:	Age (as of 9/1/07):
School:	Grade (as of 9/1/07):	Email:	Allergies:	Did you fill out a special needs form*?

**Child #3**

Last Name:	First Name	Gender:	Birthdate:	Age (as of 9/1/07):
School:	Grade (as of 9/1/07):	Email:	Allergies:	Did you fill out a special needs form*?

**Child #4**

Last Name:	First Name	Gender:	Birthdate:	Age (as of 9/1/07):
School:	Grade (as of 9/1/07):	Email:	Allergies:	Did you fill out a special needs form*?

*\*Please fill out the Special Needs form if your child has special conditions that might affect his/her experience in our YRE program.*

**⊕ Communication**

Our primary method of communication is through our Yahoo Group UUFR YRE News (uufryrenews). If you are not a member, we encourage you to join by providing your email: \_\_\_\_\_. You will receive email notification and will need to accept the invitation to join to begin receiving communications.

Occasionally we might need to call you at home. What is the latest you take calls? \_\_\_\_\_ p.m.

**⊕ Membership Status (please check one)**

- MEMBER of UUFR (I/we make a pledge and have signed the book)
- FRIEND of UUFR (I/we make a pledge but have not signed the membership book)
- Regular VISITOR at UUFR (I/we do not make a pledge) *\*\*Please note that after 6 months, visitors are encouraged to become members or friends.*

My child/ren has/have my permission to participate in the 2007-2008 Religious Education program. I give permission to paid and volunteer staff at UUFR to seek medical attention in an emergency. **I have also read the UUFR Behavior Policy.**

My insurance policy name and number are: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Occasionally we might use photographs of UUFR children in some of our promotional materials for YRE Events or on our UUFR Website. Please sign and date if you **DO NOT** want your child's image used for these purposes.

NAME: \_\_\_\_\_ Date: \_\_\_\_\_

Unitarian Universalist Fellowship of Raleigh - 3313 Wade Avenue Raleigh, NC 27607 - 919-781-7635 - [education@uufr.org](mailto:education@uufr.org)

**MAKE SURE YOU COMPLETE THE VOLUNTEER REGISTRATION ON THE REVERSE OF THIS PAGE!**



## Youth Religious Education (YRE) Volunteer Positions



Our YRE program is cooperative and depends largely on volunteer leadership and support. The 2007-2008 programs will require the participation of nearly 300 volunteers! Our expectation is that all parents in families with children enrolled in YRE will select volunteer positions within six months of discovering UUFR. Most volunteer positions require between 15-35 hours of *service per year*, although this varies widely. This year we have included many one-time and lower-level commitments in the hopes that we will have a high participation level in our volunteer program.

Whatever your skill set (and your time budget), there is a position to suit you!

Please write the name of your preferred position(s) on this form. A comprehensive, up-to-date list of available positions, including brief explanations, is posted on the window outside the YRE office and on the UUFR website (<http://www.uufr.org/yre/index.htm>). Please return this registration form by August 1, but keep in mind that the positions will fill up quickly so the sooner you can get it in, the better! **Additionally, if you have no preference and would prefer we just assign you a job, please leave this form blank and you will be notified of the position we have placed you in.**

<u>Parent 1 Name/Email Address:</u>
<u>Position requested:</u>
<u>Second choice:</u>
<u>I would like to accept the additional position(s) of:</u>

EXEMPTION: (check boxes)

- I've been at UUFR for *less than six months* and am not ready to select a position.
- I'm exempt from volunteering because I am a **board member** or *committee chair*.

<u>Parent 2 Name/Email Address:</u>
<u>Position requested:</u>
<u>Second choice:</u>
<u>I would like to accept the additional position(s) of:</u>

EXEMPTION: (check boxes)

- I've been at UUFR for *less than six months* and am not ready to select a position.
- I'm exempt from volunteering because I am a **board member** or *committee chair*.

**\*\*You will receive a confirmation email about your volunteer position.**

Thank you for helping us maintain a top quality religious education program at UUFR,  
*Tryst Chagnon, DRE and Beth Nathison YRE Program Assistant*

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