

Gwynedd Friends Meeting - Youth Quaker Education

Youth and Parent Contact Info

Today's Date: _____

Children & Youth Info

Name(s): _____

Birth Date(s): _____

Current Grade(s) & School(s) Attending : _____

Email Address (if applicable): _____

Cell Phone Number (if applicable): _____

Does your child have any allergies, physical concerns or special challenges of which you'd like us to be aware when working with your child?

Parent Info

Parent Name(s): _____

Parent Email Address(es): _____

Mailing Address(es): _____

Parent Phone Number(s): _____

Emergency contact name & number: _____

Are you receiving the weekly announcements and monthly newsletter from Gwynedd Meeting? Yes No

If not, would you like receive these? Yes No

Anything else you'd like to tell us about you or your child?

Please return this completed form to the Gwynedd Youth Program Coordinator at youthcoordinator@gwyneddmeeting.org or bring form with you to the next YQE meeting