

**Mourning Hope
Holiday Hope Youth Registration Form**



If registering more than one child, please list names, ages, grades, and t-shirt sizes on the back of this form

Youth Name _____ Male Female Age: _____ Current Grade: _____

For middle or high school students please list T- Shirt size (specify youth or adult with the size) _____

Parent/Guardian Name(s): _____

Address _____ E-mail: _____

Daytime Phone: _____ Cell Phone: _____

Emergency contact (other than parent/guardian in case you cannot be reached):

Name: _____ Phone number: _____

Please list the name of the person who died, the date of death, and the relationship to the child.

Snacks and lunch will be provided. Please list any dietary concerns (participants are encouraged to bring their own lunch/snacks if dietary concerns exist): _____

Permission to use images/comments for publicity: During this workshop, Mourning Hope staff and members of the media may or may not take photographs, videotape activities and interview attendees. *Participation is optional* and will not be compensated in any way. By checking the "yes" box below, you grant permission for our staff and the media to use any comments and images of yourself and the child named above in news coverage and/or promotions without further consent or approval.

Yes, we will participate

No, we prefer not to be interviewed, photographed, or videotaped.

Parent/Guardian Signature: _____ Date: _____

Send this form and check or money to:

Mourning Hope Grief Center
Attn: Holiday Hope
4919 Baldwin Avenue
Lincoln, NE 68504

Please do not let the cost keep you from attending. Scholarships are available. Please contact Jennifer Bass at 402-488-8989 or jbass@mourninghope.org for information or questions.