

**St. Thomas United Church and Symons Valley United Church
Youth (Grades 7-12) Registration Package
2026/2027**

Letter to Parents/Guardians

Welcome to the St. Thomas/Symons Valley Youth Group!

All youth in Grades 7 – 12 are invited to join us, along with their friends. We typically meet two times per week, on Sunday mornings and Friday evenings.

Sunday morning youth group is a time for learning and discussion around various topics such as mental health, social justice or scripture, along with a catch up about the week. We are pleased to offer Sunday morning youth group time at both St. Thomas United Church and Symons Valley United Church. Please attend whichever location works best for you. The Sunday morning service begins at 10:30 am at both St. Thomas and Symons Valley United Churches.

Our weekly social activity usually occurs on Friday evenings, with the occasional event held on a Saturday or Sunday instead. Since we are running a joint youth group, our Friday events will rotate between St. Thomas, Symons Valley and other locations around Calgary. We typically meet from 7-9pm. For events held at St. Thomas, we start in the upper hall, and for events at Symons Valley, we will meet in the main foyer. Variations to event days or times and any other necessary information will be communicated in weekly emails.

The Youth Leaders will send out an email at the beginning of every week to let you know what activities will be taking place on the upcoming Friday and where it will be held. **We ask that parents/guardians or youth use email as much as possible to respond either way if the youth will be attending or not.**

Everyone is welcome to invite friends to our activities. Please let the Youth Leaders know if friends are joining for an event so that a registration package can be signed by their parents or guardians, and we can pass along any relevant information for the upcoming event.

Activities for Friday Night Youth Group events might include:

- Games nights
- Movie nights
- Drawing/craft nights
- Baking nights
- Scavenger hunts
- Minute to Win It
- DnD
- Youth and young adult worship services
- Service projects (for example: writing letters to seniors in our church communities)
- Off-site activities such as mini golf, disk golf, swimming, bowling, wall climbing, or laser tag

We are looking forward to getting to know the youth! We can't wait for another fun year.

Annalee McKellar and Serena Moar

St. Thomas United Church and Symons Valley United Church
Youth Registration Form
GRADES 7 – 12
2026-2027

Youth's Name _____ Birthdate _____ Current Age: _____
(dd / mm /yyyy)

Address _____ Postal Code _____

Youth's Phone _____ Youth's Email _____

Alberta Health Care Number _____ School _____ Grade: _____

Does the participant have any disabilities, behavioral/mental health needs, or other medical concerns that the Youth Leaders should be aware of to provide the best experience for the participant (for example: allergies, ADHD, anxiety/depression, etc.)?

☐ Yes ☐ No

If yes, please state particulars: _____

Does the participant require assistance or program modifications to participate to their fullest extent? ☐ Yes ☐ No

If yes, please state particulars: _____

Please state any food allergies or dietary restrictions that the Youth Leaders should be aware of when providing drinks, snacks, and/or meals for the participant. _____

If needed, please use the next lines to state any other considerations that should be taken into account about the participant:

Parent/Guardian's Names _____ Email: _____

Address (if different than above) _____ Postal Code _____

Primary Emergency Contact Phone: _____ Secondary Emergency Contact Phone: _____

Emergency Contact if parent/guardians cannot be reached:

Name _____ Relationship _____

Address _____

Phone 1) _____ 2) _____

Please confirm that you have received and read Page 1 (Letter to Parents/Guardians) of this registration package _____
(initial)

PERMISSION FORM

I _____ the *parent/legal guardian* of _____ give my permission for my child to participate in those activities that are part of the St. Thomas United Church and Symons Valley United Church Youth Group programming. I understand that this form does not pertain to those activities that will take my child out of town or events that require activity-specific waivers. I hereby assume responsibility should my child break any of the SADV (no sex, alcohol, drugs, and violence) rules at any of these activities or refuse to follow safety protocols, and I understand that, should this happen, my child will be asked to leave said activity. Furthermore, I agree that the above information is correct to the best of my knowledge.

Signature of *parent/legal guardian* _____

May we use the email address supplied to remind you of upcoming meetings? If we may, please initial here: _____
(If, at any time, you no longer wish to receive these emails, simply reply to an email with 'Remove me from your email list' or 'unsubscribe' in the subject line. You can also call the St. Thomas church office at 403-241-0366 or the Symons Valley church office at 403-274-2361 and request to be unsubscribed.)

St. Thomas United Church

100 Hawkwood Blvd. NW Calgary, Alberta T3G 2S9

Phone: (403) 241-0366

office@stthomasunited.ca

www.stthomasunited.ca

Symons Valley United Church

38 Kincora Rise NW Calgary, AB T3R 0A3

Phone: 403-274-2361

essie@symonsvalleyuc.com

www.symonsvalleyuc.com

PARENT APPROVAL, ACKNOWLEDGEMENT AND RELEASE FORM

Participant's Name

I/We the parents (and/or Guardians) of the above named participant, hereby give our approval and acknowledgement to their participation in programs offered by St. Thomas United Church and Symons Valley United Church between September 1, 2026 and August 31, 2027. (See attached letter for examples of activities.)

I/We do hereby acknowledge and agree that the participation of our child, above named, is at our sole risk and liability; moreover, we hereby release and agree to hold harmless St. Thomas United Church, Symons Valley United Church, the instructor, coordinator, leader or any responsible appointed adult from any and all actions, the cause of actions, claims liability and demand whatsoever arising out of or in any way related to or connected with this program without limitations.

I/We do hereby consent to any medical attention or any other care or treatment considered necessary.

Signature

Date

Witness Signature

Date

Participant's Alberta Health Care Number: _____

Please note any health concerns, allergies, or special medication required by the participant:

St. Thomas United Church and Symons Valley United Church Photograph Release
(Children/Youth)
2026/2027

As part of the programs at St. Thomas United Church and Symons Valley United Church, electronic and/or film images or video recordings may be taken of you and your child or children. These images could be used for worship services, group activities such as crafts, and as part of our promotional materials on our website or on our social media page. St. Thomas United Church and Symons Valley United Church will not publish the name of your child or his or her personal information.

Note: Other photographs of your child may be taken as part of group activities and may be taken home by other children participating in this program. Once the images are in the possession of persons outside of St. Thomas United Church and Symons Valley United Church, St. Thomas United Church and Symons Valley United Church are not responsible for the way the images are used.

I _____, give St. Thomas United Church (STUC) and Symons Valley United Church (SVUC) permission to use my child's image in any pictures, photos, video recordings, digital images, and the like, taken or made on behalf of STUC or SVUC. Any images can be used to publicize STUC or SVUC activities and the church community at large. I acknowledge that I will not receive compensation for the use of these images, and hereby release STUC and SVUC from any and all claims. I waive all copyright to these images.

I understand that this permission is granted from date of signature forward into the future unless I specifically revoke this permission in writing at a future date. It applies to all images created prior to the date of signing this form and also any images created in the future.

I **DO** give my consent to St. Thomas United Church and Symons Valley United Church to use my child's (children's) likeness:

Date _____ Parent or Guardian name (print) _____
Parent/Guardian Signature _____
Child's name(s) _____
Email _____ Primary Contact Number _____

I **DO NOT** give my consent to St. Thomas United Church and Symons Valley United Church to use my child's (children's) likeness:

Date _____ Parent or Guardian name (print) _____
Parent/Guardian Signature _____
Child's name(s) _____
Email _____ Primary Contact Number _____