

## NAZARETH MAR THOMA CHURCH, IRELAND YOUTH FELLOWSHIP 2025 REGISTRATION FORM

(Mar Thoma Youth Fellowship U.K & Europe Zone Diocese of UK, Europe & Africa)

Name:
Gender:
Age:
Area:
Father's name:
Mother's name:
Email address:
Phone number:
<u>Declaration</u>
I wish to enroll myself for the Youth Fellowship and I am willing to pay €5 as a registration fee.
☐ I hereby give my consent to use my photographs/videos taken during Youth Fellowship/Church programs/ activities for Youth Fellowship/Church promotional purposes, printed publications, internet posts including social media and other media sources.
Applicant's signature:
Parent/Guardian's Declaration  (For applicants below the age of 16)
I confirm that my child can register for the Youth Fellowship and that I am willing to pay €5 as a registration fee.
☐ I hereby give my consent to use the photographs/videos of my child taken during Youth Fellowship/Church programs/activities for Youth Fellowship/Church promotional purposes, printed publications, internet posts including social media and other media sources.
Parent's signature: