Youth Ministry Communication Waiver

2011-2012

I, _____ (parent's name) give permission to St. Bartholomew Youth Ministry and Faith Formation to communicate with my child, _____ in _____ grade, via (Please check the appropriate boxes):

- ☐ Text Message (#): _____
- ☐ Email: _____
- ☐ Facebook (Name: St-Barts Youth-Ministry) Parent/Youth must initiate friend request.

_____ _____

Parent Signature Date