



G.E.M. "Girls Empowered for More" Program

Membership Application

Young Females Ages 7 to 18

Last Name	First Name	
Address	City	<i></i>
Zip Code		
Parent/Guardian: Last Name	First Name	
Home Telephone Number		Cell Number
SchoolAge	Grade	Date of Birth
E-mail		
Allergies/Disabilities		
Emergency Contact other than parent/guardian:		
Last Name	First Name	
Relationship to the Student		Phone
I herby give my daughter permission to participate in p Jubilee nor its partners are responsible for any sicknes program. I also give permission for Jubilee to transpor cameras and other media may photograph my child as and promote Jubilee.	s or injury the appl t my daughter to an	icant may receive while in attendance of the sy events off site. I am also aware that the news
Parent/Guardian	_ Date	

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Jubilee Family Development Center • 1512 Florida Ave. Lynchburg, VA 24501

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