



180 GENERATION180 STUDENT MINISTRIES

Last Name: _____ First Name: _____

Street Address: _____

City/State/Zip: _____

Home Phone: _____ Your Cell Phone:* _____

Your Email Address: _____

Social Media-Share with us your user name so we can connect:

Facebook _____ Twitter _____ Instagram _____

Birthdate: ____/____/____ Male or Female (circle one)

School: _____ Grade: _____

Church Home _____ If HCC, which campus? _____

Parent/Guardian Name(s): _____

Parent/Guardian Cell Phone(s): _____

Parent's Email Address: _____

Is this your first time here? Yes No Today's Date: ____/____/____

How did you hear about G180 or name of friend you came with?

MINISTRY AREAS

Are there areas you have gift or skill that you would like to use to help out at G180?

If so, please put an "X" next to the area.

Youth Band: _____ If checked, instrument played or vocals - _____

Video/Media Tech: _____ Soundboard Operator: _____

Other: _____

(Please specify)

***Please note that your cell phone number will be added into our texting data base.
You will need to opt-in if you would like to receive text messages from us***

Welcome to G180!