

**BEN HILL UMC - HIGHER ED AND CAMPUS MINISTRY
HIGH SCHOOL REGISTRATION FORM**

Please complete the information and return this form to the Higher Education mailbox located in
Room 200 (Copier Room)

Name _____ Gender: ___Male ___Female
 High School _____ Grade _____
 Email _____
 Address _____
 City _____ Zip Code _____ Home Phone _____
 Parent(s) _____ Email _____
 Cell Number(s) _____
 Confirmation Date _____ Date You Joined Ben Hill UMC _____

Church Activities	School Activities/Accomplishments

Three career goals you have considered and why:
