



San Antonio Lutheran Coronation Court Page



Application

P.O. Box 781515
San Antonio, TX 78278

Full Name: _____

Home address: _____

E-mail: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Age: _____ (to be eligible must be entering 2nd grade through 8th grade).

Mother's name: _____

Home address: _____

E-mail: _____

Home Phone: _____ Cell Phone: _____

Father's name: _____

Home address: _____

E-mail: _____

Home Phone: _____ Cell Phone: _____

Siblings and ages: _____

CHURCH

Home church: _____

Church Address: _____

Church phone number: _____ Church website: _____

Pastor's name: _____

Church Activities: _____

SCHOOL

School name: _____

Grade presently enrolled: _____

School activities and clubs: _____

COMMUNITY

Organizations/Clubs belong to: _____

We understand the commitment that is being asked of us for the year. We also understand that we are representing the San Antonio Lutheran Coronation Association, home church, and our family in all associated functions. We understand that upon the approval by the board for participation, we will be notified and be given more information about the upcoming year.

Applicant's Signature

Parent's Signature

Date

Date

NOMINATION

Nominated by: _____

Phone number: _____

Why are you nominating this young individual: _____

Court Page Chair
P.O. Box 781515
San Antonio, TX 78278
salcacourtpages@gmail.com

**CONSENT OF DISCLOSURE, AUTHORITY TO RELEASE INFORMATION, and PHOTO RELEASE
and PARADE PARTICIPANT RELEASE / PARADE PHOTO RELEASE**

I/We,

_____, grant
to the San Antonio Lutheran Coronation Association the following:

- The right to take photographs of me and my family in connection with any and all activities associated with the San Antonio Lutheran Coronation and other events that I/We participate in. I authorize San Antonio Lutheran Coronation Association, its assigns and transferees to copyright, use, and publish the same in print and/or electronically. I agree that San Antonio Lutheran Coronation Association may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web/Social Media content.
- Authorize the disclosure and/or release of information with regard to my background and any data file that may have pertinent information. I/We authorize our church/parish, _____, to disclose any and all information about my/our involvement in the church/parish.

I/We have read and understand the above.

Applicant signature

Parent signature

Date

Date

_____ CONSENT OF DISCLOSURE, AUTHORITY TO RELEASE INFORMATION

_____ PHOTO RELEASE

_____ PARADE PARTICIPANT RELEASE / PARADE PHOTO RELEASE