



Spangdahlem Pre-Teen & Teen Center

Youth Introduction

The staff at Youth Programs are here to help you make your move easier. Please tell us a little about your child and their interests. First, are you arriving / new to the area or getting ready to leave?

<input type="radio"/>	My child will be moving to Spangdahlem, Germany	<input type="radio"/>	My child will be leaving the Spangdahlem area. They will be moving to / near: _____ <i>Ex: Peterson AFB, Syracuse, NY, etc.</i> (We'll forward your child's information to your next Youth Programs so they can send you information on their offerings as well as the local area!)
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Parent / Guardian Information

Name(s): _____ Address: _____

Duty Phone: _____ Home / Cell: _____

Email: _____ City: _____ State: _____ Zip: _____

Squadron / Unit: _____ Arrival / Departure Date: _____

Child Information (Please complete separately for each child)

Name: _____ Gender: _____ Age: _____ Grade: _____
If summer, last grade completed

Email (If applicable): _____

Please have your child tell us their interests below. *(Don't see what they're into? Tell us on the next page)*

Sports	Music	Clubs / Programs	Hobbies / Interests
<input type="checkbox"/> Archery	<input type="checkbox"/> Alternative / Indie	<input type="checkbox"/> Chapel Youth Group	<input type="checkbox"/> Animals
<input type="checkbox"/> Baseball / Softball	<input type="checkbox"/> Blues / Jazz	<input type="checkbox"/> Congressional Award Program	<input type="checkbox"/> Cars
<input type="checkbox"/> Basketball	<input type="checkbox"/> Choir / Singing	<input type="checkbox"/> Geocaching	<input type="checkbox"/> Comedy
<input type="checkbox"/> Bowling	<input type="checkbox"/> Comedy	<input type="checkbox"/> Goals for Graduation	<input type="checkbox"/> Computers
<input type="checkbox"/> Cheerleading	<input type="checkbox"/> Composing / Writing Music	<input type="checkbox"/> Homeschool	<input type="checkbox"/> Cooking
<input type="checkbox"/> Football	<input type="checkbox"/> Country / Folk	<input type="checkbox"/> JROTC	<input type="checkbox"/> Dancing
<input type="checkbox"/> Frisbee	<input type="checkbox"/> Dance / Electronic / Techno	<input type="checkbox"/> Junior Honor Society	<input type="checkbox"/> DJ
<input type="checkbox"/> Golf	<input type="checkbox"/> Gospel	<input type="checkbox"/> Keystone Club	<input type="checkbox"/> Drama
<input type="checkbox"/> Gymnastics	<input type="checkbox"/> Hip Hop / Rap	<input type="checkbox"/> Military Youth of the Year	<input type="checkbox"/> Filmmaking
<input type="checkbox"/> Hiking / Walking	<input type="checkbox"/> I play an instrument: (List in other)	<input type="checkbox"/> Scouts (Boy & Girl)	<input type="checkbox"/> Fitness
<input type="checkbox"/> Hockey	<input type="checkbox"/> Metal	<input type="checkbox"/> SMART Girls	<input type="checkbox"/> History
<input type="checkbox"/> Horseback Riding	<input type="checkbox"/> Pop / Top 40	<input type="checkbox"/> Sports Club /Triple Play	<input type="checkbox"/> Movies
<input type="checkbox"/> Karate / Judo / Taekwon Do	<input type="checkbox"/> R&B / Soul	<input type="checkbox"/> Teen Tech Team	<input type="checkbox"/> Outdoors
<input type="checkbox"/> Running	<input type="checkbox"/> Reggae	<input type="checkbox"/> Torch Club	<input type="checkbox"/> Painting
<input type="checkbox"/> Skiing / Snowboarding	<input type="checkbox"/> Rock	<input type="checkbox"/> AF Teen Council	<input type="checkbox"/> Photography
<input type="checkbox"/> Soccer		<input type="checkbox"/> 4-H	<input type="checkbox"/> Reading
<input type="checkbox"/> Swimming		<input type="checkbox"/> Other: _____	<input type="checkbox"/> Science
<input type="checkbox"/> Tennis		<input type="checkbox"/> Other: _____	<input type="checkbox"/> Scrapbooking
<input type="checkbox"/> Volleyball		<input type="checkbox"/> Other: _____	<input type="checkbox"/> Technology
<input type="checkbox"/> Weights		<input type="checkbox"/> Other: _____	<input type="checkbox"/> Travel
<input type="checkbox"/> Wrestling			<input type="checkbox"/> Video Games
			<input type="checkbox"/> Writing



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Other (If your child has any other interests not listed, please list them here)

52 FSS Youth Programs
Unit 3670 Box 170
APO, AE 09126-0170

Questions? Call +49 656 561 8041 or DSN 452-8041
Email: 52FSS.FSY.YouthTeenCenter@us.af.mil