

YOUTH GROUP REGISTRATION

Please print clearly

STUDENT NAME _____

ADDRESS _____

city – state – zipcode _____

PHONE NUMBER(_____) _____ (please include area code)

SCHOOL _____ **grade** _____ **age** _____

BIRTHDATE _____ **E mail address** _____

Primary language _____ **Secondary language** _____

PARENT NAME or GUARDIAN NAME

relationship _____

ADDRESS _____

city – state- zipcode _____

PHONE NUMBER (_____) _____ (please include area code)

Primary language _____ **Secondary language** _____

Parents E Mail Address _____

PARENT NAME or GUARDIAN NAME

relationship _____

ADDRESS _____

city – state- zip code _____

PHONE NUMBER (_____) _____ (please include area code)

Primary language _____ **Secondary language** _____

Parents E Mail Address _____

I would like to help with: Snacks (bring) _____

Trips/Retreats/Service Projects _____

Be a part of adult volunteer team _____

Other _____