

# Youth Group Registration Form (7<sup>th</sup> and 8<sup>th</sup> grade)

Sundays 3:30pm – 4:45pm in Room 1  
(One form per student)

## Contact Information

First Name		Last Name	
Date of Birth		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address (street, city, zip)			
Home Phone		Cell Phone	
E-mail		Shirt Size	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2X
School		Grade	<input type="checkbox"/> 7 <input type="checkbox"/> 8
Parish Registered		Parish Attended	
Mass most attended	<input type="checkbox"/> 5:15 <input type="checkbox"/> 8:00 <input type="checkbox"/> 9:30 <input type="checkbox"/> 11:00 <input type="checkbox"/> 1:00 <input type="checkbox"/> 6:00	Sacraments Received	<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation

## Family

Youth Lives With:  Mother and Father  Mother  Father  
 other: \_\_\_\_\_

Siblings (Name, Age, & Grade):

Mother	
Full Name	
Religion	
Work Phone	
Cell Phone	
E-mail	

Father	
Full Name	
Religion	
Work Phone	
Cell Phone	
E-mail	

## Parent Support

- I am interested in becoming a member of the support team and help in the following area(s):
- Provide Food  Chaperon at an Event  Be a Driver  Set Up / Clean Up
- Sorry, I am unable to commit to any volunteer services at this time

Please note that the annual \$50 registration fee will go towards administrative and operational expenses for Youth Group and includes a t-shirt. If you have any concern about the fees, please contact the pastor or me. Please do not let financial concerns stand in the way of registering your child or children. Thank you for your support.

### For Office Use Only

Fee Paid:  Full  Partial  None  
Check#: \_\_\_\_\_ Date: \_\_/\_\_/\_\_  
 Shirt Received: \_\_/\_\_/\_\_

**Turn over and complete.**

**Parental Agreement**

In Signing this form, I acknowledge that the information I have given is accurate. I agree to direct my child to cooperate with the rules and instructions of the ministry and parish. In the even that my child consistently misbehaves and/or acts inappropriately, I agree to be contacted by the youth leader and pick up my child from the event. If the problem continues to persist, I understand that my child may be removed from the program for the remainder of the year.

Parent / Guardian Signature:	Date:
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**Youth Survey**

To be filled out by youth:

Sports / Hobbies		Leisure activities	
School Clubs		Memberships (scouts, etc.)	
Favorite TV Shows		Favorite Bands	
Hang Out Spots		Favorite Books	
Myspace name/ URL		Instant Message	<input type="checkbox"/> AIM <input type="checkbox"/> Yahoo <input type="checkbox"/> Other: Screen Name:
Personal Goals			
How You Spend Your School Vacations			
Top 3 areas to serve	<input type="checkbox"/> Music <input type="checkbox"/> Social Justice <input type="checkbox"/> Environment <input type="checkbox"/> Fundraisers <input type="checkbox"/> Media <input type="checkbox"/> Skits		
What do you want to get out of Youth Group?			

**St. Anthony of Padua  
5770 N Maroa  
Fresno, Ca. 93704**

**Phone:559-439-0124 x111 Fax: 559-439-3050**

**Email: Sharon Christison: schristison@stanthony.org**

**Please include emergency form and a copy of Baptism if preparing for sacraments.**