

St. Joseph's Catholic Church
Youth Group Registration Form
(7th grade through 12th grade) 2018-2019

Youth's Name _____
(First, Middle & Last)

Nickname _____

Birth date _____
(month/day/year)

Address _____ City _____

State _____ Zip Code _____

Mother's name _____
(First, Maiden)

Father's name _____
(First & Last)

Parent's Phone # _____
(home) (cell)

Emergency Phone # _____

Parent's E-mail _____

Youth's E-mail _____

School you attend _____

Grade: _____

Allergies: _____

Extracurricular Activities (My favorite . . .)

Sports: _____

Movies: _____

TV Shows: _____

Foods: _____