

Date \_\_\_\_\_

# ST. ANSELM YOUTH GROUP

## Registration Form

### Grades 9-12

Student Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City Zip

Student Cell \_\_\_\_\_ Student Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Parent Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Current Grade \_\_\_\_\_ High School Attending \_\_\_\_\_

Activities, Clubs, Sports or Volunteer Programs you are involved in \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mother's Name \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

Second Contact, Name \_\_\_\_\_ Phone \_\_\_\_\_

Pertinent Medical Information \_\_\_\_\_  
\_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

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*NOTE: Student is responsible for a \$5 contribution toward the purchase  
of a Fair Raffle item sponsored by the youth group*

Paid Date \_\_\_\_\_

**Please return this form completely filled out to the Religious Education Office, Youth Group Meeting or drop in the collection basket**