

**OUR LADY QUEEN OF PEACE
YOUTH MINISTRY PROGRAM
2017-2018 Registration Form**

Full Name: _____ I prefer to be called: _____

Address: _____

Home Phone: _____ Mom's Cell: _____

Cell Phone: _____ Dad's Cell: _____

Email: _____ Mom's Email: _____

Date of Birth: _____ Dad's email: _____

Date of Baptism: _____ T-Shirt Size _____

Do you have any allergies? _____

School Attending: _____ Grade: _____

Current Extra Curricular Activities: _____

What gifts and talents would you like to share with the Youth Group and the Parish? For example, you may play a musical instrument, you are an artist, good at technology, writing, event planning, or you may like to bake? Please write them below for us!!

In case of
Emergency Contact: Name: _____ Tele No.: _____

Youth Signature: _____ Date: _____

Parents/Guardians:

(Please Print) _____ *(Signature)* _____ Date: _____

(Please Print) _____ *(Signature)* _____ Date: _____