



Ste Genny's



YOUTH



Youth Group Registration

Year 2011-2012

Name: \_\_\_\_\_  
 Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_  
 Baptism date: (if applicable) \_\_\_\_\_ School Grade: \_\_\_\_\_  
 Mother's name: \_\_\_\_\_  
 Father's name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Family email address: \_\_\_\_\_  
 Youth email address: \_\_\_\_\_  
 Youth's special interests and activities: \_\_\_\_\_

Any Allergies? \_\_\_\_\_  
 Sibling attending church school? \_\_\_\_\_  
 Names/Ages: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Phone: \_\_\_\_\_

If church school is in need of help in the following area, give me a call:

<input type="checkbox"/> Driving	<input type="checkbox"/> An extra pair of hands if someone is away
<input type="checkbox"/> Telephoning	<input type="checkbox"/> Prayer support
<input type="checkbox"/> Donate Supplies	<input type="checkbox"/> My suggestion _____
<input type="checkbox"/> Shop for supplies	
<input type="checkbox"/> Food for special occasions	<input type="checkbox"/> Sorry, I am unable to help at this time

Is there any other information that would assist us in working with your youth? (If necessary please reverse side of this paper.)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Photo release year 2011-2012: I give permission for the SG Youth group to use my son/daughter's photo in brochures, newsletters and web pages.      yes       no

Parent name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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