



MARION YOUTH MINISTRIES

2020 -2021 High School Youth Ministry Registration Form

YOUTH INFORMATION (PLEASE PRINT)

Name: _____ DOB: _____

Grade: 9 10 11 12 School: _____ Parish: _____

Cell Phone #: _____ Can we text you? YES NO
If youth does not have a cell phone please leave blank

Email: _____ T-Shirt Size S M L XL XXL
If youth does not have an email address please leave blank

YOUTH INTERESTS

Youth Nights Bible Study Youth Choir Service Projects

PARENT INFORMATION (PLEASE PRINT)

Mom's Name: _____ Cell #: _____

Mom's Email: _____ May we text you? YES NO

Dad's Name: _____ Cell #: _____

Dad's Email: _____ May we text you? YES NO

Youth Allergies: _____

Youth Behavior Issues: _____

INFORMATION

VOLUNTEER: Are you willing to help out at any of our youth activities?

Mom: YES NO Do you have VIRTUS certification? YES NO

Dad: YES NO Do you have VIRTUS certification? YES NO

REQUIRED FORMS: Archdiocese of Cincinnati Medical Form/Permission Slip

Parent Signature: _____ Date: _____