



MARION YOUTH MINISTRIES

2020 -2021 Middle School Youth Ministry Registration Form

YOUTH INFORMATION (PLEASE PRINT)

Name: _____ DOB: _____

Grade: 6 7 8 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

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

REQUESTED

DONATION: Program \$25.00 (this helps offset the cost of our program supplies)

Please make checks payable to Marion Catholic Community

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: Registration Form and Archdiocese of Cincinnati Medical Form/Permission Slip

Parent Signature: _____ Date: _____

OUR MIDDLE SCHOOL YOUTH MINISTRY IS OPEN TO ALL THOSE IN THE 6th, 7th and 8th GRADES