

ST. THOMAS MORE CATHOLIC CHURCH 2020-2021

YOUTH GROUP REGISTRATION
JR. HIGH AND SR. HIGH

Student's Full Name _____ Male ___ Female ___
First Middle Last

Home Phone # _____ Cell Phone # _____ Student's Birthdate _____

Email addresses of BOTH Parent & Youth

Parent(s) Email: _____ Student Email: _____

Mailing Address _____ City _____ Zip _____
Grade _____ High School: West High ___ City High ___ Regina ___ Liberty ___ Clear Creek Amana ___ Other _____
T-Shirt Size for youth: Small ___ Medium ___ Large ___ XL ___ 2X ___

Pictures of my child taken during events may be used in print or electronic media for the purposes of publicity for future events or parish newsletters: Yes ___ No ___

PARENT/GUARDIAN INFO

Father ___ Step-Father ___ Guardian ___ Name _____ Phone _____

Mother ___ Step-Mother ___ Guardian ___ Name _____ Phone _____

Family registered at St. Thomas More Parish? Yes ___ No ___

TUITION \$45.00 *per student. Please make check payable to St. Thomas More R.E.*

All Confirmation students are required to apply for Youth Group fee
\$25 .00 per-student

Check # _____ Amount _____

*JR. HIGH STUDENTS: Are you currently enrolled in the St. Thomas More RE program: YES ___ NO ___. If you marked 'Yes' your Jr. High Youth Ministry Fee is included in RE Registration. If you marked 'No' a fee of \$45.00 is required. All Confirmation Students are required to apply at \$35

Please complete other side

Youth, What Gifts do you have? Please check all that apply:

Sing ___ Instrumental ___ Drama ___ Dance ___ Sports ___ Lector ___ Altar server ___ Eucharist Minister ___

Service work ___ Speech team ___ Artist ___ Farmer ___ Help teach RE ___ Photography ___ Webpage/Computer ___

Journalist ___ Mass Greeter ___ Other _____ Please explain 'other' _____

YOUTH GROUP ACTIVITIES ARE HELD ONCE A MONTH FROM SEPTEMBER – AUGUST

Parent: I am willing to (check all that apply) _____ help chaperone service projects/retreat
_____ assist with office help
_____ other _____

Please note any physical, health, or learning condition of your child of which we should be aware _____

EMERGENCY INFORMATION: In the event of an emergency, if parent/guardian cannot be contacted, the following contact should be made:

Name _____ Relationship _____ Phone(s) _____

Family Physician _____ Hospital _____

*The Permission, Health and Medical Release Form must be attached to the registration form for both Junior High and Senior High Youth Ministry. This form is a requirement per the Diocese of Davenport for the safety of our youth. Check or initial the line indicating the form is included _____.