



# YOUTH GROUP REGISTRATION FORM



2025-2026

## STUDENT INFORMATION:

LAST NAME	FIRST NAME	SCHOOL	EDGE GRADE	ALLERGIES	IF YES, PLEASE EXPLAIN
			6 7 8	Y N	
			6 7 8	Y N	
			6 7 8	Y N	
			6 7 8	Y N	

Student Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Father's Cell #: (\_\_\_\_) \_\_\_\_\_ Mother's Cell #: (\_\_\_\_) \_\_\_\_\_

Father's Email \_\_\_\_\_ Mother's Email \_\_\_\_\_

Please send youth group emails to: ☐ Father ☐ Mother ☐ Both

Yes! I'm interested in helping with the Youth Group! ☐ Father ☐ Mother ☐ Both

## EMERGENCY CONTACT (if Mother/Father can not be reached):

Name: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

Relationship to child \_\_\_\_\_

**\*In case of Emergency:** I give permission for Our Lady of Fatima Staff/Volunteers to seek medical attention in the event I cannot be reached. \_\_\_\_\_

**\*Photo release:** I hereby give permission for my child to be photographed/videotaped at Our Lady of Fatima. I also give permission for any photograph to be published in the newspaper, parish website or other publication for the purpose of information/education regarding programs at Our Lady of Fatima Parish. \_\_\_\_\_

## **Youth Group Registration: \$75/student or \$100/family. Two ways to submit form/payment:**

1. **Hardcopy:** Return the form to the School or Parish Office with a check payable to Our Lady of Fatima Parish with "Youth Group" in the memo line.
2. **Electronic/Online:** Scan/email form to [youthgroup@olfatima.org](mailto:youthgroup@olfatima.org), AND pay online @ [https://pushpay.com/g/olfatima?fnd=4I2P43g90f9YC0eK33\\_uiA&fndv=Default&src=pcgl](https://pushpay.com/g/olfatima?fnd=4I2P43g90f9YC0eK33_uiA&fndv=Default&src=pcgl)