

YOUTH GROUP

2023 - 2024

NAME: _____ PH #: _____

GRADE: _____ AGE: _____ SCHOOL: _____

EMAIL: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

MOTHER'S NAME: _____ PH #: _____

EMAIL: _____

FATHER'S NAME: _____ PH #: _____

EMAIL: _____

There is a \$20 fee for Youth Group participants. Payment can be made by cash, check or online at holyspiritfresno.org .

EMERGENCY CONTACT NAME AND PHONE NUMBER OTHER THAN PARENT