

ST. SOPHIA 2021-2022 YOUTH PROGRAM REGISTRATION FORM

Check:

- Sunday School
- Greek School
- GOYA
- JOY
- Dance Group
- Altar
- Play Date
- Basketball/Sports
- Children Choir

Children Name(s)	DOB	Grade	Baptismal Name/ Patron Saint
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

School District: _____

Contact Information

Email Address(es): _____

Address:

Street: _____ Apt # _____

City: _____ Zip Code: _____

Home Phone number: _____

Emergency Contact & Phone # : _____

Mother's Name: _____ Cell Phone: _____

Father's Name: _____ Cell Phone: _____

Check and provide address below if either parent or assigned guardian has different address than student

Mother Father Guardian Name: _____

Street: _____ Apt # _____

City: _____ Zip Code: _____

Email: _____

Food or other ALLERGIES: _____

I have read, understand, and agree to abide by the rules and covenants of our church.

Parent's Signature: _____ Date _____