



REGISTRATION 2021-2022

GRADES 7-9

Name: _____

Address: _____

City, State, Zip: _____

Email: _____ Phone: _____

Date of Birth (mm/dd/yyyy): _____ Age: _____

School Name: _____ Grade: _____ Shirt Size: _____

If you have questions, contact Ms. Terri at 253 922 7882 or faith@stmartinoftoursfife.com

Sacraments received: *(check all that apply)*

- Baptism
- Reconciliation
- Eucharist
- Confirmation

Involvement in Parish Ministries:

Is your family registered at St. Martin of Tours Parish? *(circle one)* **Yes** **No** **Not Sure**

Parent Name: _____

Phone *(if different from above)*: _____

Parent Email/s: _____

PARENT VOLUNTEER INFORMATION

We need your help to make this program a success. Please choose at least one area you can commit to this year.

- | | |
|---|---|
| <input type="checkbox"/> Base Camp Team (assist with Wednesday evening gatherings) | <input type="checkbox"/> Assist with Service Projects |
| <input type="checkbox"/> Shopper (Gather/buy needed items for events-food, craft, etc.) | <input type="checkbox"/> Driver (Assist with transportation to/from event) |
| <input type="checkbox"/> Retreat or Convention Team (Assist on an all-day or overnight event) | <input type="checkbox"/> Chaperone for special event (Movie/Game Night, service work, etc.) |
| <input type="checkbox"/> Snack Coordinator (serve snacks and clean up) | <input type="checkbox"/> Other (e.g. phone calling, music, office)
Describe: _____ |

Have you have Safe Environment Training? *(circle one)* **Yes** **No** **Not Sure**