Edge: Students in Grades 5-8

Registration Fee: \$50

Kick-Off: Thursday, 22nd September 2022; 6:30pm-8:00pm; St. Joseph Room

Name of Student:				
Current Mailing Address:				
City/Town:	Postal Code	Date of Birth:		
School Attending:	Grade (F	Grade (Fall 2022): Sex (M/F)		
PARENT INFORMATION				
Mother's Name:	Email:			
Mother's Telephone: (H)	(C)			
Father's Name:	Email:			
Father's Telephone: (H)	(C)			
EMERGENCY CONTAC	Γ: Person who can be co	ntacted to pick	up child	
Name:	Relationship:	tionship: Telephone:		
need, or add information w Allergies, medical condition currently receive at school.)	ns, English as a second la			
REGISTRATION FEE: \$ Life Teen and Edge youth n cash. Please make cheques	ninistry programs. Please	ps offset the co e enclose the exa	st of the lessons for both act amount, if paying by	
PARENT/GUARDIAN C collect personal information contact information, emerg for registration. Signature of Parent/Guardi	n that may include identi ency contact information	fication inform a, and any simil	ation, parent/guardian ar information required	
Permission is granted to tal youth ministry or events. It website.				
Signature of Parent/Guardi	an:	Date:		