

# YOUTH LEADER

## Participant Registration Form

---

Parish / School: \_\_\_\_\_

City and State: \_\_\_\_\_

(Arch)Diocese in which your community is located: \_\_\_\_\_

### **Team Leader**

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Gender: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Cell/Home Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you play a musical instrument or lead songs? Yes No

If yes, please list: \_\_\_\_\_

Name as you would like it on your name tag \_\_\_\_\_

Have you completed the Criminal Record and Child Abuse Registry Check? \_\_ yes \_\_ no

Have you participated in the Safe Environments Workshop? \_\_\_\_\_ yes \_\_\_\_\_ no

### **Adult Participants** (if not Adult Team Leader)

Name: \_\_\_\_\_

Birth date: \_\_\_\_\_ Gender: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you play a musical instrument or lead songs? Yes No

If yes, please list: \_\_\_\_\_

Name as you would like it on your name tag \_\_\_\_\_

Have you completed the Criminal Record and Child Abuse Registry Check? \_\_ yes \_\_ no

Have you participated in the Safe Environments Workshop? \_\_\_\_\_ yes \_\_\_\_\_ no

## Youth Participants

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

Birth date: \_\_\_\_\_ Last Completed Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you play a musical instrument or lead songs? Yes No

If yes, please list: \_\_\_\_\_

Name as you would like it on your name tag \_\_\_\_\_

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

Birth date: \_\_\_\_\_ Last Completed Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you play a musical instrument or lead songs? Yes No

If yes, please list: \_\_\_\_\_

Name as you would like it on your name tag \_\_\_\_\_

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

Birth date: \_\_\_\_\_ Last Completed Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you play a musical instrument or lead songs? Yes No

If yes, please list: \_\_\_\_\_

Name as you would like it on your name tag \_\_\_\_\_

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

Birth date: \_\_\_\_\_ Last Completed Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you play a musical instrument or lead songs? Yes No

If yes, please list: \_\_\_\_\_

Name as you would like it on your name tag \_\_\_\_\_

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

Birth date: \_\_\_\_\_ Last Completed Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you play a musical instrument or lead songs? Yes No

If yes, please list: \_\_\_\_\_

Name as you would like it on your name tag \_\_\_\_\_

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

Birth date: \_\_\_\_\_ Last Completed Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do you play a musical instrument or lead songs? Yes No

If yes, please list: \_\_\_\_\_

Name as you would like it on your name tag \_\_\_\_\_