



# Sacred Heart Catholic Church

7809 46th Way N., Pinellas Park, FL 33781 ~ (727) 541-4447

URL: [sacredheartpinellaspark.com](http://sacredheartpinellaspark.com)

Email for Youth Ministry: [Frkevinyarnell@gmail.com](mailto:Frkevinyarnell@gmail.com)

## Youth Ministry Registration (2020-2021)

### Child's Info:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Grade in the Fall: \_\_\_\_\_

Gender:  male  female

Date of Birth: \_\_\_\_\_

School Attending: \_\_\_\_\_

Sacraments already received :  Baptism  First Communion  Confirmation

Child Lives with:  Both Parents  Mother  Father  Other \_\_\_\_\_

If divorced, joint custody?  yes  no

### Mother's Info:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

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

Preferred Method of Communication:  Text  Email

### Father's Info:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

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

Preferred Method of Communication:  Text  Email

**By signing below,** I acknowledge that this is the first half of the registration process and that I will need to submit a completed Annual Parental Permission/Release form; which must be notarized. For the safety of your child, this registration form AND the Annual Parental Permission/Release form must be submitted before your child can attend youth ministry.

Parent's Signature \_\_\_\_\_ Date Signed: \_\_\_\_\_

Parent's Printed Name: \_\_\_\_\_