



**Monday Night Middle School**  
**Uniontown Roman Catholic Churches**  
**2019-2020 Faith Formation/Youth Ministry**  
**Registration Form**  
**Grades 6 – 7 – 8**

Today's Date: \_\_\_\_\_

Family Last Name: \_\_\_\_\_

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

Father's name: \_\_\_\_\_ Cell: \_\_\_\_\_

Mother's name \_\_\_\_\_ Cell: \_\_\_\_\_

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

**Home Parish:** \_\_\_\_\_

1. Student Name: \_\_\_\_\_

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

Grade: \_\_\_\_\_ School: \_\_\_\_\_

Health Information: \_\_\_\_\_

2. Student Name: \_\_\_\_\_

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

Grade: \_\_\_\_\_ School: \_\_\_\_\_

Health Information: \_\_\_\_\_

**Emergency Information:**

While your child/children are in our care it is important for us to have the following information:

\*\*\*Whom should we contact in case of emergency? (If different from above)

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

\*\*\* List all individuals who are permitted to pick up your child/children (i.e. names of parents grandparents, neighbor, etc) 1) \_\_\_\_\_

2) \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

Early Bird Registration Fee: One child: \$20.00 2 or more children: \$35.00 Due August 11  
After August 11<sup>th</sup> One child: \$45.00, 2 or more children \$60.00 – Due August 25

**For Office Use:**

Date Received: \_\_\_\_\_ Cash: \_\_\_\_\_ Not Paid: \_\_\_\_\_

Make check payable to Home Parish