

St. Madeleine Jr/Sr High Youth Group

Member Information Sheet

"Growing and Sharing our Faith"

Name: _____ Birthday: _____ Age: _____

Address: _____

Phone (Home): _____ (Cell): _____ Email: _____

Mother's Name: _____ Father's Name: _____

Parent's Phone # (if different from above): _____

School Name: _____ School Grade: _____

Food Allergies: Yes _____ No _____ If yes, which ones: _____

Musical talent (voice, instrument, etc): Yes _____ No _____ If yes what instrument (s): _____

Hobbies: _____

Suggestions for Fund Raisers: _____

Suggestions for field trips: _____