

# Holy Cross Youth Ministry Registration 2019-2020

Please print all information clearly!  
\$100 Registration Fee –  
Please make checks payable to  
“Holy Cross CYO”

Name \_\_\_\_\_

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

Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Your Email: \_\_\_\_\_ @ \_\_\_\_\_

Phone: \_\_\_\_\_ School: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Alternate Emergency Contact:

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