

FOR OFFICIAL USE ONLY

PARISH ID # \_\_\_\_\_

Fees: \$ \_\_\_\_\_

Paid: \$ \_\_\_\_\_

Cash: \_\_\_\_\_ Ck#: \_\_\_\_\_

PLEASE RETURN REGISTRATION FORMS ASAP

(WITH PAYMENT OR PAYMENT PLAN ATTACHED)

TO ST. TIMOTHY CATHOLIC COMMUNITY

1730 W. Guadalupe Rd. Mesa, AZ 85202

Payments can be made by credit card by calling 480-775-5222.



# REGISTRATION

Life Teen serves youth in 9<sup>th</sup>, 10<sup>th</sup>, 11<sup>th</sup> and 12<sup>th</sup> grades.

REGISTRATION FEE: \$60 PER TEEN (ONLY \$5 per month September-August)

FULL & PARTIAL SCHOLARSHIPS ARE AVAILABLE UPON WRITTEN REQUEST.

ST. TIMOTHY CATHOLIC COMMUNITY - 2009/2010 School Year

PLEASE PRINT CLEARLY. INFORMATION IS FOR THIS HOUSEHOLD ONLY.

Family Last Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Adult in this \_\_\_\_\_ Relation to Child: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Adult in this \_\_\_\_\_ Relation to Child: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

PARENT E-MAIL\*\*\* **\*\*\*REQUIRED: EMAIL IS OUR MAIN COMMUNICATION WITH FAMILIES REGISTERED IN THE LIFE TEEN MINISTRY.**

TEEN E-MAIL\*\*\* \_\_\_\_\_

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

*Life Teen is offered Sunday evenings after the 5pm Teen Mass.*

Teen Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
First & Last Name \_\_\_\_\_ Grade: \_\_\_\_\_ Sex: Male / Female

Has your child received Baptism, Confirmation & First Eucharist? Yes / No If not, would you like information on Sacramental preparation? Yes / No

Teen Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
First & Last Name \_\_\_\_\_ Grade: \_\_\_\_\_ Sex: Male / Female

Has your teen received Baptism, Confirmation & First Eucharist? Yes / No If not, would you like information on Sacramental preparation? Yes / No

PLEASE DESCRIBE ALL MEDICAL, BEHAVIORAL, LEARNING OR CUSTODY SITUATIONS BELOW:

EMERGENCY CONTACT INFORMATION If both adults listed above are unavailable, please contact: (Other than listed above.)

Name: \_\_\_\_\_ Relation to Child(ren): \_\_\_\_\_

Day Phone: \_\_\_\_\_ Eve Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

LIFE TEEN PARENT VOLUNTEER OPPORTUNITIES:

\_\_\_\_\_ Cooks for Life: Helps cook and serve dinner at Life Nights and Retreats.

\_\_\_\_\_ Phone Calling: Make phone calls from home as needed

\_\_\_\_\_ Fundraising Committee: Helps implement fundraisers for Life Teen events and trips.

I understand that all payments are non-refundable. Further, I give permission to have photos taken of my child(ren) for the purpose of parish use.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_