

Holy Martyrs of Japan



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Email. youthministry.hmj@hotmail.com

Registration Form (Grades 6-8)

PLEASE COMPLETE BOTH SIDES OF THIS FORM

Youth's Full Name _____

(First)

(Middle)

(Last)

Prefers to be called: _____ Date of Birth: _____ Male Female

Primary Family Email: _____ Home Phone: _____

Address: _____ Apt#: _____

City: _____ Postal Code: _____

PARENT/GUARDIAN INFORMATION

Mother/Guardian's Information

Name: _____

Cell #: _____

Work #: _____

Email: _____

Relationship to Child: _____

(If not parent)

Father/Guardian's Information

Name: _____

Cell #: _____

Work #: _____

Email: _____

Relationship to Child: _____

(If not parent)

SACRAMENT VALIDATION (please circle one)

Was child baptized in the Catholic Church? ~If not, was your child baptized in another faith?		Yes	No
		Yes	No
Has your child received first holy communion/Eucharist?		Yes	No
Has your child received first reconciliation/confession?		Yes	No
Are you registered at Holy Martyrs of Japan Parish?		Yes	No

REMINDER

EDGE is Bi-weekly on Friday Nights from
7pm to 8:30pm in the Church Hall.
Youth are welcome to arrive at 6:45pm

MEDICAL RELEASE INFORMATION

Emergency contact. If we are unable to reach parent/guardian in the event of an emergency:

Name/Relationship: _____ Phone #: _____

Special conditions of Candidate (i.e., allergies, medical conditions, etc.): _____

My child has special needs. (please list anything we should be made aware of): _____

PARENTAL PERMISSION/RELEASE & OTHER INFORMATION

Media Release Form

***This section must be completed and signed!**

I hereby grant permission for my child _____ to be photographed and/or video recorded during EDGE activities. I further grant permission for resulting photographs and/or video footage to be edited, if necessary, and then published and/or broadcasted for the purpose of promoting EDGE and/or youth programs at Holy Martyrs of Japan Church on printed materials and on our website. I understand that my Child can decline to be photographed at anytime.

- Yes, my child has my permission to sign him/her self out from the EDGE and walk home.
- Yes, I would like to be emailed information about upcoming youth ministry events.

Parent /Guardian Signature

Parent Involvement

Parents are an important part of the EDGE Ministry. The more that you are involved in your faith, the more our youth will see the importance of their own faith.

Please consider supporting EDGE

- Yes, I am interested in supporting EDGE by bringing snacks and drinks
-IF Yes please sign up in the hall when you drop off your child
- Yes, I would like to support EDGE with a financial donation
-IF Yes please see attached envelope
- Yes, I am interested in supporting EDGE as a volunteer leader
-IF Yes I can be contacted at:

Email address or Phone Number

- Sorry, I am unable to volunteer services for EDGE at this time.