



# Saint Cecilia Parish

BAINBRIDGE ISLAND

## Youth Group Registration

Name of Child \_\_\_\_\_  
First Middle Last Date of Birth

Name of Child \_\_\_\_\_  
First Middle Last Date of Birth

School Attending: \_\_\_\_\_

Family is registered at St. Cecilia Parish:  Yes  No

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

Mother's Name \_\_\_\_\_

Home Address \_\_\_\_\_

Preferred Phone/Email for communication with parents:

Primary Contact

Mother's Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Father's Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Questions? Stacy Dixon  
Pastoral Assistant for Faith Formation  
[faithformation@saintcparish.org](mailto:faithformation@saintcparish.org)