



Sacred Heart Youth Ministry EDGE Registration Form

~ We will be communicating by e-mail whenever possible ~

Home Phone: () - Emergency Phone: () -

Parent(s) Names: _____

Full Postal Mailing Address: _____

1st YOUTH'S FULL NAME _____

BIRTH DATE _____ GENDER _____ GRADE 5 6 7 8

SCHOOL _____ OHIP # _____

YOUTH'S OR Parent E-MAIL ADDRESS _____

2nd YOUTH'S FULL NAME _____

BIRTH DATE _____ GENDER _____ GRADE 5 6 7 8

SCHOOL _____ OHIP # _____

YOUTH'S or Parent E-MAIL ADDRESS _____

I would like to volunteer as an Adult Core Team Member at the *EDGE Nights* _____

Suggested Donation Fee: \$20 per person

Donation Paid: \$ _____

Tax Receipts will be issued for donations of \$10 and over.

Would you like a Tax Receipt? YES NO

Cash or Check. Checks are made payable to Sacred Heart LaSalle Youth Ministry. Cheque # _____

Does your child have any special needs due to a learning disability, physical disability, reading difficulty, hearing impairment, emotional problem, medical condition, custody issues or any other reason? Use back if necessary.



I/we understand that reasonable precaution will be taken to safeguard the health and safety of the participant(s) and that the designated emergency contact person will be notified as soon as possible in case of emergency. In the event of any sickness or accident person(s) will not hold Sacred Heart Parish, Staff, Youth Commission, the Roman Catholic Episcopal Diocese of London, any volunteer, chaperone, or driver responsible. I/we authorize and consent that emergency treatment be rendered under the general or specific supervision and on the advice of any physician, dentist, or surgeon; licensed to practice in the Province of Ontario or any other province. The undersigned understand(s) and agrees that any medical, dental, or hospital expense incurred shall be at their own expense. The undersigned understand(s) every effort will be made to notify the emergency contact in the event that treatment is necessary.

(SIGNATURE) _____ (DATE) _____

Note: Whenever possible, if EDGE is cancelled (snow day, storm, etc) a message will be left on the Parish Phone @ (519) 734-7512 x3.