



**2017-2018  
YOUTH REGISTRATION FORM  
GRADES 9-12**

(Please complete and bring with you to the Registration Dinner on Wednesday, September 20th, along with your \$30 registration fee-one fee per family) Scholarships available upon request.

Children's Names: 1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

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

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

Phone Numbers Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Date of Birth: 1. \_\_\_\_\_ Age: \_\_\_\_\_  
2. \_\_\_\_\_ Age: \_\_\_\_\_  
3. \_\_\_\_\_ Age: \_\_\_\_\_  
4. \_\_\_\_\_ Age: \_\_\_\_\_

Current School Grade: 1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

Allergies/Medical Info:  
\_\_\_\_\_  
\_\_\_\_\_

*Register for*  
**GILASSES**