



EDGE[®]
Catholic Middle School Ministry

St. Therese Parish Courtice

EDGE Registration 2017-2018

PARTICIPANT INFO

Adult T-shirt Size (unisex) – Circle One
S M L XL

First Name: _____ Last Name: _____

Age _____ Birth date: _____ Gender: _____ Grade: _____

School: Leo Cleary Mother Theresa Good Shepherd Other: _____

Teacher: _____

Medical Info/ Allergies: _____

Sacraments

Please check all that apply. Has your child been:

- Baptised
- Received First Communion/Reconciliation
- Confirmation
- Would be interested in finding about more for me or my child becoming Catholic

Parent Information

Mothers Name: _____ Mothers Cell Phone: _____

Father's Name: _____ Father's Cell Phone: _____

Home Phone: _____

Primary contact email: _____

Second email if desired: _____

Can we add you to our email list to receive updates regarding EDGE (circle one)? Yes No

Emergency Contact

Emergency Contact Name: _____

Relationship to youth: _____

Contact number: _____