

St. Katharine Drexel Parish

YOUTH NIGHT Registration Form

2025-2026

Date of Youth Night _____

Youth Name: _____

Date of Birth: _____

Grade: _____

Parent email: _____

Mailing Address: _____

Phone Number: _____

Parent Name (please print) _____

Parent Signature

Date

You have permission to use photos in, but not limited to, local newspapers, on Parish website and on YOUTH NIGHT Facebook page.

Parent Signature

Date

In case of emergency please contact:

Name

Phone