

Steubenville Registration Form

Parent Names: _____

Student Name: _____

Parish: _____

Current Grade: _____ T-shirt size: _____

School Attending: _____

Student email: _____

Parent email: _____

Student Phone #: _____ Parent Phone #: _____

Parental permission to text? Yes No

Parent Signature: _____ Date: _____

Please return this form along with \$50 to reserve your spot to Shelley Vouk at All Saints-St. Mary's Central Office:
P.O. Box 308, Holdingford, MN 56340. Checks should be made out to: All Saints Youth.

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