

# YOUTH (UNDER AGE 18) VOLUNTEER APPLICATION

*The following information will be kept confidential. Please print clearly.*

## PERSONAL DATA OF APPLICANT

Name \_\_\_\_\_ Birthday \_\_\_\_\_  
first      middle      last

Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Your E-Mail \_\_\_\_\_

Grade Level and School you attend \_\_\_\_\_

Please specify the parish and city in which you/your family are registered members

Mother's Name \_\_\_\_\_

Mother's Home Address (if different from yours) \_\_\_\_\_

Mother's Home Phone (if different from yours) \_\_\_\_\_ Cell \_\_\_\_\_

Father's Name \_\_\_\_\_

Father's Home address (if different from yours) \_\_\_\_\_

Father's Home Phone (if different from yours) \_\_\_\_\_ Cell \_\_\_\_\_

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Please indicate the city/name of the parishes/schools/programs with which you would like this application to be registered.

City	Name of Parish/School/Program	For Office Use Only-Date Sent

I give my son/daughter permission to participate in programs/activities/events sponsored by the Catholic Diocese of Green Bay or its local representatives. My son/daughter may complete the necessary paperwork required for participation.

\_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
Date

