



The EDGE Registration Form

We will be communicating by e-mail whenever possible

YOUTH'S FULL NAME _____

BIRTH DATE _____ male _____ female _____ GRADE _____ SCHOOL _____

YOUTH'S E-MAIL ADDRESS _____

Please circle child's main contact parent and or phone number(s)

Family's Last Name _____ Home Phone Number _____

Address _____ Father's Full Name _____

City, Prov. _____ Father's Work Phone _____

Postal Code _____ Mother's Full Name _____

Email: _____ Mother's Work Phone _____
(this email will be used for communication and notices for the Edge and the parish)

HOW CAN I HELP? (please circle or check your choices)

I would like to volunteer with the EDGE: YES _____ (please refer to page 2 of this form) not interested _____

I would like to sponsor activities/food/events for the EDGE \$10 _____ \$20 _____ \$30 _____ Other _____

Catechetics Annual Registration Fee is \$30.00 per youth \$35.00 after September 1st, 2007

Amount Paid \$ _____ Cheque # _____ Cash _____

Date of Registration: _____

No youth is ever turned away for a lack of funds

(if you are not a part of the Religious Education Program for any of the churches listed in the box below, you are not obligated to attend all nights, and if this is the case, a donation is acceptable in place of the registration fee)

Cheques payable to St. Thomas Aquinas Canadian Martyrs

The information below is confidential to those involved in running the EDGE

Does your child have any special needs due to a learning disability, physical disability, reading difficulty, hearing impairment, emotional problem, or any other reason? (please explain)

Describe any allergy, chronic illness or other conditions: _____

Does this child take any medications? NO _____ YES _____ List: _____

My child has no special needs _____

In case of emergency, please contact: _____ Phone _____

Check the appropriate box ONLY if the statement applies

Our youth has not been baptized in the Catholic Church _____

I/We would like to discuss baptism and/or sacrament preparation for our youth _____

The Church we usually attend is STA _____ Canadian Martyrs _____ St. Theresa's _____ St. Catherine's _____

Other _____ **We do not currently attend a church** _____

Name: _____

PARENT and ADULT VOLUNTEERS are an important part of the EDGE ministry. As you may know, this time during Jr. High is a challenging time in a young persons life. They need the support of their peers, their church, and especially their parents! I would appreciate any time you can give to the ministry. The more that you are involved in your faith, the more your young people will see the importance of their own faith. Below are some ways you and your family can get involved.

Type of ministry	Brief description	Commitment involved	Yes I am interested in this ministry
Crew team member	Minister to teens (contact Cristina for further info)	~ 3 hours weekly	
Snack team coordinator	Organize a team of parents who will provide snacks	1 call per week + organizing a list	
Snack Team	Provide a snack and drinks for 30-40 teens	4-8 times a year	
Transportation Ministry coordinator	Organize a team of parents who will provide rides to events that are off-site	Call transportation ministers when an event arises	
Transportation minister	Provide safe transportation for teens to and from events in the diocese	1-6 times a year	
Supply team coordinator	Organize a group of volunteers to pick-up and deliver supplies for EDGE nights	phone calls and/or (monthly)	
Supply team	Be willing to go and pick up supplies for activities for the edge nights	4 times a year	
Minister of Hospitality Team	Write up thank you cards, birthday cards, etc. help to organize appreciation events	2 hours a month	
	and/or seek out teens at masses and invite them or follow up with them!	At masses weekly or bi-weekly	
Service Project team	Help to organize service projects for the teens	1-2x a year	
Retreat Administrative team	Organize food and logistics for our annual EDGE retreat along with the Youth Minister	1 weekend per year	
Phone ministry	Make phone calls to parents and teens when there are changes to the schedule	1-2x per month	
Prayer Warriors	Pray for the ministry, the Crew team, the teens, the parents, the volunteers, and the Leaders.	Your choice (adoration, rosary, mass, etc)	
Other	If you think that you can add to this ministry in any way please attach a letter to this page and tell me how	Your choice	

RELEASE STATEMENT – Please Read Carefully

- I hereby grant permission for my child to be photographed and/or videotaped during *EDGE* Activities and events. I understand that my child may decline to be photographed and/or videotaped at any time. I further grant permission for the resulting photographs and/or videotaped footage to be edited, if necessary, and then published and/or broadcast for the purpose of promoting the *EDGE* and/or youth programs in the Archdiocese of Halifax.**

Name (PLEASE PRINT) _____

(SIGNATURE) _____ (DATE) _____

- I hereby decline to grant permission for my child to be photographed and/or videotaped during *EDGE* activities and events. I have instructed my child to decline to be photographed and/or videotaped at all times. I have further instructed my child to notify *EDGE* coordinators and/or Crew Team Members that he/she may not be photographed and/or videotaped under any circumstances.**

Name (PLEASE PRINT) _____

(SIGNATURE) _____ (DATE) _____

Thank you for taking the time to fill out this form. It will help us to serve your youth better. If you have any questions or concerns please feel free to call the office or email at the email below.

Cristina STACM Youth Minister
 902-423-3057 ext. 223 email: youth@stacm.ca (please include “The Edge” in the subject line)