



# Diocese of Southwest Florida 2010 Individual Registration Form

Please fill out all information requested

Name of Event: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_ T-Shirt size: (Circle one) YM YL S M L XL 2X 3X

Male: \_\_\_\_\_ Female: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

School: \_\_\_\_\_ Church, City: \_\_\_\_\_

Sponsor: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_

Complete the above line only if event requires a Sponsor and Participant is under 18 years of age.

*If you do not have a youth leader at your church, mail this completed registration along with your check, made payable to the Diocese of Southwest Florida, 7313 Merchant Ct., Sarasota, FL 34240, Attn: Michelle Mercurio. Payment may also be made via credit card/ debit card. If you would like to opt for this payment method, please complete the following:*

Visa / MC # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Debit Card # \_\_\_\_\_

**I UNDERSTAND THAT ALL PAYMENT IS DUE AT THE TIME OF REGISTRATION**

\_\_\_\_\_ PARENT SIGNATURE

\_\_\_\_\_ PARTICIPANT SIGNATURE

*For more information contact your youth leader, deanery convener, or Michelle Mercurio, at the Diocese of Southwest Florida, Youth Ministry office (941) 556-0315 x274. e-mail: [mmercurio@episcopalswfl.org](mailto:mmercurio@episcopalswfl.org) or Website: [www.episcopalswfl.org](http://www.episcopalswfl.org)*

**FOR OFFICE USE ONLY**

Date: \_\_\_\_\_ Check# \_\_\_\_\_ CC: \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Paid by: \_\_\_\_\_ Amount Due: \$ \_\_\_\_\_