

**Our Lady of the Lakes  
2025 – 2026 Religious Education Program  
Registration Form – High School Youth Group**

**Sacrament Fee: \$50.00**

Is your family registered at Our Lady of the Lakes Parish? Yes \_\_\_\_ No \_\_\_\_

If yes, what is your family's envelope number? \_\_\_\_\_

Was your teen registered in our HS Youth Group or Religious Education Program last year? \_\_\_\_\_

Teen's Name: \_\_\_\_\_  
Last Name First Name Middle Name

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_Male  
\_\_\_Female

Father's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

Primary Residence: \_\_\_\_\_  
Address City Zip Code

Primary Phone: \_\_\_\_\_ Primary e-mail: \_\_\_\_\_

Teen lives with: Both Parents \_\_\_\_ Mother \_\_\_\_ Father \_\_\_\_ Guardian \_\_\_\_

Teen's Baptism Date: \_\_\_\_\_ Place: \_\_\_\_\_

Teen's First Communion Date: \_\_\_\_\_ Place: \_\_\_\_\_

**New families: 1) Provide a copy of teen's sealed Birth Certificate \_\_\_\_\_  
2) Provide a copy of teen's sealed Baptism Certificate \_\_\_\_\_  
3) Complete Parish Registration Form \_\_\_\_\_**

Parent's Name (Print) Parent's Signature Date

**FOR OFFICE USE ONLY:**

**Sacrament Year** 1<sup>st</sup> Year \_\_\_\_ 2<sup>nd</sup> Year \_\_\_\_ N/A \_\_\_\_

**Sacrament to receive this school year:** 1<sup>st</sup> Communion \_\_\_\_ Confirmation \_\_\_\_

Registration Fee Paid Cash \_\_\_\_ Check \_\_\_\_ Check # \_\_\_\_ Receipt #: \_\_\_\_\_ Date \_\_\_\_\_

Sacrament Fee Paid NA \_\_\_\_ Cash \_\_\_\_ Check \_\_\_\_ Check # \_\_\_\_ Receipt #: \_\_\_\_\_ Date \_\_\_\_\_

Total Received Cash \_\_\_\_ Check \_\_\_\_