

## Phoenix Youth Center Registration Form

Name: First	MI Last	
Address		
Date of Birth	_ Parent's Name	
Home Phone	Cell Phone	
Parent Email		
Emergency Contact		
Relationship to Child	Phone	#
School	Grade	
I hereby give permission for my Phoenix Youth Center and agreeday he/she is in attendance.	child e to have transportation	to attend the arranged by closing each
Parent/Guardian Signature		
Allergies		
Other specifications		
Office Use Only		
Date Entered	_	
Initials		