

First Reconciliation and First Communion Retreat

Youth Volunteer Registration Form

Please return to the Christian Formation Office by Sunday, November 12, 2017

Youth Volunteer's Name: _____

Parent(s) Names: _____

Phone number: _____

Email address: _____

I can volunteer at (please check all that apply):

___ **First Reconciliation Retreat on Saturday, December 2.** I plan to be at the retreat from 8:45am – 12:15pm.

___ **First Communion Retreat on Saturday, March 10.** I plan to be at the retreat from 8:45am – 12:15pm.

If applicable, please provide the following information:

2nd Grade Child's Name: _____

Relationship to Child: _____