

**ASCENSION OF OUR LORD GREEK ORTHODOX CHURCH  
YOUTH REGISTRATION FORM 2016-2017**

This **ONE** form can be used to register your child(ren) for:  
**HOPE (40 Days – 3 years-old) | FAITH/JOY (K-5<sup>th</sup> Grade)\* | JOY/Jr. GOYA (Grades 4-8)\* |  
GOYA (Grades 9-12) | ACOLYTES (Boys, Grade 4 and up)**

**FAMILY LAST NAME:** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY / STATE / ZIP \_\_\_\_\_

HOME PH (      ) \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ CELL PH \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_ CELL PH \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

***REGISTRATION/BOOK/ACTIVITIES FEE - HOPE-\$10; Joy/Jr.Goya: \$40.00/Per Child; No fee for Faith/Joy, GOYA & Acolytes***

**PLEASE CHECK APPROPRIATE MINISTRY BOXES FOR EACH CHILD**

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1. BAPTISMAL NAME \_\_\_\_\_ NAME FRIENDS CALL YOU \_\_\_\_\_

AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ NAME DAY \_\_\_\_\_

GRADE IN SCHOOL \_\_\_\_\_ NAME OF SCHOOL / WHERE \_\_\_\_\_

ANY SPECIAL NEEDS / THINGS WE SHOULD KNOW / ALLERGIES \_\_\_\_\_

**HOPE** (\$10 per child)       **FAITH/JOY** (no fee)       **JOY/JR. GOYA** (\$40 per child)       **GOYA** (no fee)       **ACOLYTES** (no fee)

.....  
2. BAPTISMAL NAME \_\_\_\_\_ NAME FRIENDS CALL YOU \_\_\_\_\_

AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ NAME DAY \_\_\_\_\_

GRADE IN SCHOOL \_\_\_\_\_ NAME OF SCHOOL / WHERE \_\_\_\_\_

ANY SPECIAL NEEDS / THINGS WE SHOULD KNOW / ALLERGIES \_\_\_\_\_

**HOPE** (\$10 per child)       **FAITH/JOY** (no fee)       **JOY/JR. GOYA** (\$40 per child)       **GOYA** (no fee)       **ACOLYTES** (no fee)

.....  
3. BAPTISMAL NAME \_\_\_\_\_ NAME FRIENDS CALL YOU \_\_\_\_\_

AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ NAME DAY \_\_\_\_\_

GRADE IN SCHOOL \_\_\_\_\_ NAME OF SCHOOL / WHERE \_\_\_\_\_

ANY SPECIAL NEEDS / THINGS WE SHOULD KNOW / ALLERGIES \_\_\_\_\_

**HOPE** (\$10 per child)       **FAITH/JOY** (no fee)       **JOY/JR. GOYA** (\$40 per child)       **GOYA** (no fee)       **ACOLYTES** (no fee)

4. BAPTISMAL NAME \_\_\_\_\_ NAME FRIENDS CALL YOU \_\_\_\_\_

AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ NAME DAY \_\_\_\_\_

GRADE IN SCHOOL \_\_\_\_\_ NAME OF SCHOOL / WHERE \_\_\_\_\_

ANY SPECIAL NEEDS / THINGS WE SHOULD KNOW / ALLERGIES \_\_\_\_\_

HOPE  
(\$10 per child)

FAITH/JOY  
(no fee)

JOY/JR. GOYA  
(\$40 per child)

GOYA  
(no fee)

ACOLYTES  
(no fee)

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\* Note: Fourth and Fifth graders are able to participate in both FAITH/JOY and JOY/Jr. GOYA

ARE YOU WILLING TO HOST DINNER (Joy/Jr. Goya) OR A SNACK (GOYA, HOPE, FAITH/JOY)?

[YES]                      [NO]

CAN YOU VOLUNTEER TO ASSIST WITH ANY OF THE FOLLWING? Please circle all that apply:

- MEETINGS
- CRAFTS
- FIELD TRIPS/SPECIAL EVENTS
- CHRISTMAS PAGEANT
- RETREATS
- MAILINGS/OUTREACH

ARE YOU A CURRENT STEWARD OF THE ASCENSION?

[YES]

[NO]

**APPLICABLE REGISTRATION FEES:**

HOPE \$10                      \$ \_\_\_\_\_

JOY/Jr. GOYA \$40            \$ \_\_\_\_\_

TOTAL PAYMENT AMOUNT: \$ \_\_\_\_\_

**PAYMENT TYPE**

CHECK NUMBER/DATE: \_\_\_\_\_

*(payable to Ascension of Our Lord. Please indicate which Youth Program in the check memo)*

Credit Card: *Circle One:* Visa | Mastercard | Discover

Account Number \_\_\_\_\_ Exp Date \_\_\_\_\_ CVC 3-digit code \_\_\_\_\_

Signature / Date \_\_\_\_\_

Questions? Or to pay by phone, call the Church office at 847.482.1200.