



13 E. Mt. Pleasant Ave. Philadelphia, PA 19119
 Phone: 610.322.8049 Fax: 215.247.0292
 Director: Raymond Garcia
 Asst. Director: Kylie Hardin

Group Team Member Registration Form

Church / Org. Name: _____ Group Leader: _____ Project Dates: ____/____ - ____/____

	Gender M / F	First & Last Name	Pair with...	Leader or Grade	Age	Shirt Size	Health Form	Release Form	Parent / Guardian's Name	Emergency Phone #
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Pairing: Please suggest the name of another student that you would prefer your student be paired with. Consider what would make this week a winner for your teen both spiritually and relationally. **Age:** Please put the age the teen will be during the Project. **Grade:** Please put the grade that the student will be in or entering during the Project. **Shirt Sizes:** Small, Med, Large, XL, XXL (Please note that we will do our best to match your sizes, however quantities are limited.)