

Name \_\_\_\_\_  Male  Female  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home # \_\_\_\_\_  
Cell # \_\_\_\_\_ Provider (i.e. Verizon) \_\_\_\_\_  
Email \_\_\_\_\_  
Birth Date \_\_\_\_\_ Screen Name \_\_\_\_\_  
School Name \_\_\_\_\_ Class of 20 \_\_\_\_\_  
Parent(s)/Guardian you live with \_\_\_\_\_  
Parent(s)/Guardian Email \_\_\_\_\_  
How did you hear about Young Life?  Friend  Met Leader  Parent;  
 Map/Flyer  WL  Other \_\_\_\_\_  
Would you like to have club at your house?  Yes  No  
College attending next year (if applicable)  
Name \_\_\_\_\_ State \_\_\_\_\_



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