



YOUTH MINISTRY REGISTRATION

2025 - 2026



Our Lady of Fatima & Immaculate Conception Parish
724 Main Street
New London, NH 03257

Participant's Name: _____
First Middle Last

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

DOB: __/__/__ Gender: M/F Grade in the Fall: _____ School: _____

Year of Baptism: _____ Parish: _____
Name City/State

Year of Communion/Confirmation: _____ Parish: _____
Name City/State

YOUTH MINISTRY GROUP:

GRADE SCHOOL
(Grades 4 & 5)

MIDDLE SCHOOL
(Grades 6-8)

HIGH SCHOOL
(Grades 9-12)

PARENT INFORMATION:

Father's Name: _____ Roman Catholic: ___ Yes ___ No

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Mother's Name: _____ Roman Catholic: ___ Yes ___ No

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

EMERGENCY CONTACT: _____