

Youth Go Registration Form (\* = must answer)

\*First Name: \_\_\_\_\_ Preferred Name? \_\_\_\_\_

\*Last Name: \_\_\_\_\_ Pronouns: \_\_\_\_\_

Address: \_\_\_\_\_

\*City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

\*Birthdate: \_\_\_\_\_

\*School: \_\_\_\_\_

Biological Gender: \_\_\_\_\_ Race: \_\_\_\_\_

\*Grade: \_\_\_\_\_

\*Parent or Legal Guardian Name(s):

\_\_\_\_\_  
\_\_\_\_\_

Email address of a parent/guardian: \_\_\_\_\_

Mother's Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

Father's Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

Do you have any Allergies or Medical Problems? Circle YES or NO

Explain: \_\_\_\_\_

\_\_\_\_\_

Are you eligible for Free or Reduced school lunch this year? Circle YES or NO

How did you find out about Youth Go? \_\_\_\_\_

\*\*Email completed form to [info@youthgo.org](mailto:info@youthgo.org), or drop off at Youth Go.