

GFS  
Diocese of Los Angeles  
Branch: \_\_\_\_\_  
GFS Branch Registration Form



Today's date \_\_\_\_\_

Name: \_\_\_\_\_

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

\_\_\_\_\_

Birth date: \_\_\_\_\_

Grade in school: \_\_\_\_\_

Name of school attending: \_\_\_\_\_

Parent name(s): \_\_\_\_\_

Telephone(s): \_\_\_\_\_

Email address: \_\_\_\_\_

Parish: \_\_\_\_\_

Baptized? \_\_\_\_\_

Please list:

Special Medical Requirements \_\_\_\_\_

Allergies \_\_\_\_\_

\_\_\_\_\_

Who is authorized to pick up this child? \_\_\_\_\_

Who is NOT authorized to pick up this child? \_\_\_\_\_

List interests, hobbies and activities: \_\_\_\_\_

\_\_\_\_\_

Please list any activities or topics you would like included in the program:

\_\_\_\_\_

Parents: Please note any skills, work or travel experience that might be a resource for the GFS program. \_\_\_\_\_

\_\_\_\_\_

*Thank you for taking the time and effort to complete this form.  
Please return it to your GFS branch leader.*