## Saint Nicholas, Baltimore, MD GOYA MEMBERSHIP APPLICATION

ELAST	FIRST
ET	
	STATEZIP
NE NUMBER (HOME) ()	(CELL)
AN'S EMAIL ADDRESS:	
HDATE/PRESENT AGEPRESE	ENT GRADEUNIFORM # TSHIRT SIZE_  ((IF ON THE GOYA TEAM) (ADULT SIZES)
DOL ATTENDING (NAME/CITY)	
PLEASE PRINT A	
PLEASE PRINT A FATHER/GUARDIAN NAME	
FATHER/GUARDIAN NAME	
FATHER/GUARDIAN NAMEFATHER'S EMAIL	
FATHER/GUARDIAN NAME  FATHER'S EMAIL  MOTHER/GUARDIAN NAME  MOTHER'S EMAIL_  I,	
FATHER/GUARDIAN NAME	WORK#(
FATHER/GUARDIAN NAME	WORK#(

Stewardship is \$25 PER CHILD, PER YEAR AND MUST ACCOMPANY THIS APPLICATION

MAKE CHECKS PAYABLE TO: SAINT NICHOLAS GOYA
RETURN WITH REQUIRED REGISTRATIONS FORMS
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