

Please complete this Registration Form and return to the CFF Office, 260 Forest Ave., Ambler PA 19002 or

Scan and email to [rortwein@saintanthonyparish.org](mailto:rortwein@saintanthonyparish.org)



REGISTRATION FORM FOR LENTEN EDGE PROGRAM

Youth Information

Name \_\_\_\_\_  
First Last

Mailing Address \_\_\_\_\_  
Street Address  
City Zip

Home Phone: \_\_\_\_\_ Grade 2009-2010 \_\_\_\_\_

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

Please check sessions will be attending:

- Feb. 21 Judas: Betrayal and Despair
- Feb. 28 Mary Magdalene: Devoted Follower
- Mar. 7 Simon Cyrene: Cross Bearer

- Some carefully selected scenes may be played from the Passion of the Christ or other Life of Jesus videos for discussion purposes

Fee:  
\$5 per session or \$10 for all 3  
Amount Enclosed \_\_\_\_\_

Continental Breakfast will be served. Any food allergies? \_\_\_\_\_

Parent Information

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

Phone number I can be reached at during event \_\_\_\_\_

I grant St. Anthony Parish permission to contact \_\_\_\_\_ via email in regard to  
Parish Youth Activities at the following email address: \_\_\_\_\_  
Youth's Name

Family Email: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_