



Holy Trinity Challenge Club Registration 2010-2011

Daughter#1: _____

Birthday: _____ Grade: _____

Daughter#2: _____

Birthday: _____ Grade: _____

Daughter#3: _____

Birthday: _____ Grade: _____

Parents' Names: _____

Virtus Trained ? : Y/N

Mom's Cell: _____ Dad's cell: _____

Home phone: _____

Email: _____

Address: _____

City: _____

State: _____

Zip: _____

T-shirt size: Youth S M L XL Adult S M L XL

Challenge Membership fees: \$130 a year
Payable to: Holy Trinity Catholic Church Challenge Club

Copies of registrations are kept at the Holy Trinity Office, because we are a ministry of the parish. Every once in a while, reports may be requested from Bishop Loverde's office. This sometimes includes a request for a roster. Please consider whether you would permit your child's name to be included, whether you would like family name only, or no name. Thank you!

Child's name Family name only No name please

Mail to: Elizabeth Block 7754 Knightshayes Drive Manassas, VA 20111