



2024 SAINT GEORGE TREK YOUTH PARTICIPANT APPLICATION

Diocese of Phoenix Catholic Committee on Scouting



Last Name: _____ First Name: _____ MI: _____

Address: _____ Date of Birth* _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Cell Phone #: _____ Applicant E-Mail: _____

Parent Name _____ Parent E-Mail: _____

Parent Cell Phone # _____ Applicant Shirt size _____

PARISH INFORMATION:

Parish Name: _____ Location: _____

Pastor's Name: _____ Phone Number _____

My Parish Activities: _____

SCHOOL INFORMATION:

School: _____ Location: _____

School Grade: (2023-2024) _____ Honors: _____

My School Activities: _____

SCOUTING INFORMATION:

Unit Type: _____ Unit #: _____ Chartering Organization: _____

City: _____ District: _____

Rank: _____ Current Leadership Position: _____ Others held: _____

My Scouting Activities: _____

My High Adventure Activities: _____
