

ANNUNCIATION PARISH RELIGIOUS EDUCATION REGISTRATION – PUAKO

2020-21

Please complete entire form and return to the parish or R.E. office ASAP.

New Returning Home Phone _____

E-mail _____

Emergency Contact (during class) _____

Name _____ Phone _____

Name of Child _____

Last First Middle

Home Address _____

Mailing Address (if different) _____

City/State _____ Date & City/State of Birth _____

Baptism-Date _____ Church _____ City/State _____

Eucharist-Date _____ Church _____ City/State _____

Confirmation-Date _____ Church _____ City/State _____

Previous R.E.- Date _____ Church _____ City/State _____

School (presently attending) _____ Grade _____

Medical Information (Allergies, etc.) _____

Parents Registered in Parish? Yes ___ No ___

Father _____

Last First Middle

Religion _____ Occupation _____

Mother _____ (_____) _____

Last (maiden name) First Middle

Religion _____ Occupation _____

I would like to help with: ___ middle school youth group ___ high school youth group

___ I would be willing to be a substitute catechist ___ I would be willing to assist in a R.E. class

Other Children in Family

NAME	DATE OF BIRTH	BAPTISM	EUCHARIST	CONFIRMATION

To help defray costs of books/activities/snacks:

Donation \$20 **Other** _____

Signature _____ **Date** _____

PARENTAL/GUARDIAN TEXT/EMAIL/PHOTO/VIDEO CONSENT FORM (Please print clearly.)

_____ Female Male
Youth Participant First Name **Middle Name (if on ID)** **Last Name**

Name of School: _____ Grade: _____ **Birthdate:** ____/____/_____

Youth's Email: _____ **Cell Phone:** (____) _____

I grant permission for my son/daughter to receive text messages/email from the Religious Education Team and/or Office. Note: Parents will always receive the same text message/email.

Father's Name: _____ **Email:** _____

Home Phone: (____) _____ **Cell Phone:** (____) _____

I grant permission to receive text messages/email from the Youth Ministry Team and/or RE Office.

Mother's Name: _____ **Email:** _____

Home Phone: (____) _____ **Cell Phone:** (____) _____

I grant permission to receive text messages/email from the Religious Education Team and/or Office.

With whom does child live? Both Parents Father Mother Other (please specify) _____

From time to time, pictures and video may be taken of youth ministry events and gatherings. We would like to be able to use these **photographs** and **videos** for flyers, parish publications, and the ministry website. Written consent of both the student and parent/guardian is required. Names will not be posted unless written authorization is given by the student and parent/guardian, and then only first names will be used. If there are concerns about pictures or videos posted on the website, please contact the ministry coordinator or webmaster, and they will promptly be removed.

I/We, the parent(s)/guardian(s) of youth named above authorize and give full consent, without limitation or reservation, to **Annunciation Parish**, to publish any photograph or video in which the above named student appears while participating in any program associated with middle or high school youth ministry. There will be no compensation for use of any photograph or video at the time of publication or in the future.

Student Signature: _____ **Date:** _____

Father/Guardian Signature: _____ **Date:** _____

Mother/Guardian Signature: _____ **Date:** _____