



# Saint Vincent Catholic Faith Formation & Youth Ministry Registration – 2017 - 2018

## Parent or Legal Guardian Information

Family Name: \_\_\_\_\_

Father \_\_\_\_\_ Mother \_\_\_\_\_

First name Last name

First name Last name

Father's religion \_\_\_\_\_ Mother's religion \_\_\_\_\_

Address \_\_\_\_\_

Street City State Zip

Telephone Number \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_

Area code and 7-digit number

Area code and 7-digit number

Emergency Contact Name & Phone Number \_\_\_\_\_

E-Mail \_\_\_\_\_@\_\_\_\_\_ Home Parish \_\_\_\_\_

**Please attach copies of your child's Baptism certificate if baptized in a parish other than Saint Vincent. (only if you haven't submitted it in the past.)**

## Children to be enrolled in Faith Formation & Youth Ministry

1. Child \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_/\_\_/\_\_\_\_ T-Shirt Size \_\_\_\_\_

### Choose the session option for this child:

\_\_\_\_\_ Pre K-5 Sunday Morning CFF \_\_\_\_\_ 6-12 Sunday Night Youth Ministry \_\_\_\_\_ Once a Month Family Option

Date of Baptism \_\_\_\_\_ Church of Baptism \_\_\_\_\_ School \_\_\_\_\_

Name of Parish City/state/country (if non-U.S.)

Date(s) and Place(s) of 1st Penance, Confirmation and 1<sup>st</sup> Communion \_\_\_\_\_

Special Needs/Allergies \_\_\_\_\_

2. Child \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_/\_\_/\_\_\_\_ T-Shirt Size \_\_\_\_\_

### Choose the session option for this child:

\_\_\_\_\_ Pre K-5 Sunday Morning CFF \_\_\_\_\_ 6-12 Sunday Night Youth Ministry \_\_\_\_\_ Once a Month Family Option

Date of Baptism \_\_\_\_\_ Church of Baptism \_\_\_\_\_ School \_\_\_\_\_

Name of Parish City/state/country (if non-U.S.)

**(turn page over)**

Date(s) and Place(s) of 1st Penance, Confirmation and 1<sup>st</sup> Communion \_\_\_\_\_

Special Needs/Allergies \_\_\_\_\_

3. Child \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_ T-Shirt Size \_\_\_\_\_

**Choose the session option for this child:**

\_\_\_\_\_ Pre K-5 Sunday Morning CFF \_\_\_\_\_ 6-12 Sunday Night Youth Ministry \_\_\_\_\_ Once a Month Family Option

Date of Baptism \_\_\_\_\_ Church of Baptism \_\_\_\_\_ School \_\_\_\_\_

Name of Parish City/state/country (if non-U.S.)

Date(s) and Place(s) of 1st Penance, Confirmation and 1<sup>st</sup> Communion \_\_\_\_\_

Special Needs/Allergies \_\_\_\_\_

## PHOTOGRAPHIC RELEASE

**A parent/guardian signature is necessary if the subject is under age eighteen.**

I hereby grant to the Diocese of Greensburg, Pennsylvania, and its respective licensees, successors and assigns, the right and permission, with respect to those photographs taken of me or the minor named below on whose behalf I am signing, and with respect to any printed or electronic matter in connection therewith, to do the following:

1. To include such photographs on the Saint Vincent Basilica Parish website for advertising purposes.
2. To use my name or the name of the minor on whose behalf I am signing, in connection with the foregoing.

I hereby release, discharge and agree to indemnify and hold harmless the Diocese of Greensburg and its legal representatives, licensees, successor and assigns, from all claims and demands whatsoever arising out of or in connection with the foregoing, and waive any right to inspect or approve the same.

Signature of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Subject of Photograph (if over 18 years of age) \_\_\_\_\_

Printed Name and Address \_\_\_\_\_

I hereby certify that I am the [parent and/or guardian] of \_\_\_\_\_, a minor under the age of eighteen years, and hereby consent on behalf of said minor to the use of any of the photographs taken of said minor pursuant to the terms set forth in this Photographic Release, including, without limitation, the release, discharge and hold harmless provisions thereof.

## REGISTRATION FEES

**Total Children Enrolled:**  One \$45  Two \$55  Three or more \$65 **Total Enclosed \$** \_\_\_\_\_ (Check  Cash  )

**Non-parishioner Enrollment:**  One \$55  Two \$65  Three or more \$75 **Total Enclosed \$** \_\_\_\_\_ (Check  Cash  )

***Are you experiencing financial difficulties? Please contact Mrs. Bridget DiVittis at the number shown below regarding scholarship or payment arrangements. NO CHILD WILL BE TURNED AWAY FROM FAITH FORMATION BECAUSE OF FINANCIAL CHALLENGES.***