

Student Information Form

(Please print all information clearly and complete all boxes)

Child's Name First	M/F	Date Of Birth	School Child Attends	Grade	My child was in Religious Educ. last year Yes/No & where	Please indicate if your child has <u>RECIEVED</u> any of the following Sacraments? (Circle Yes or No)	CHOOSE A PROGRAM FOR YOUR CHILD	Registration Fee.
						Baptism Yes No 1 st Reconciliation Yes No Confirmation Yes No 1 st Eucharist Yes No	___ ELEMENTARY (Pre-School – 5 th gr) ___ HOME-SCHOOL (Pre-School – 5 th gr only) ___ EDGE (6 th , 7 th , & 8 th gr) ___ LIFE TEEN (High School)	\$80.00
						Baptism Yes No 1 st Reconciliation Yes No Confirmation Yes No 1 st Eucharist Yes No	___ ELEMENTARY (Pre-School – 5 th gr) ___ HOME-SCHOOL (Pre-School – 5 th gr only) ___ EDGE (6 th , 7 th , & 8 th gr) ___ LIFE TEEN (High School)	\$80.00
						Baptism Yes No 1 st Reconciliation Yes No Confirmation Yes No 1 st Eucharist Yes No	___ ELEMENTARY (Pre-School – 5 th gr) ___ HOME-SCHOOL (Pre-School – 5 th gr only) ___ EDGE (6 th , 7 th , & 8 th gr) ___ LIFE TEEN (High School)	\$80.00
						Baptism Yes No 1 st Reconciliation Yes No Confirmation Yes No 1 st Eucharist Yes No	___ ELEMENTARY (Pre-School – 5 th gr) ___ HOME-SCHOOL (Pre-School – 5 th gr only) ___ EDGE (6 th , 7 th , & 8 th gr) ___ LIFE TEEN (High School)	\$80.00
						Baptism Yes No 1 st Reconciliation Yes No Confirmation Yes No 1 st Eucharist Yes No	___ ELEMENTARY (Pre-School – 5 th gr) ___ HOME-SCHOOL (Pre-School – 5 th gr only) ___ EDGE (6 th , 7 th , & 8 th gr) ___ LIFE TEEN (High School)	\$80.00

Release & Permission

I, _____ (Parent Name), request that my **child (ren)** _____ be allowed to participate in the Catechetical Ministries Program at St. Theresa Parish. This program will take place under the guidance and direction of parish employees and/or volunteers from St. Theresa Parish. As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named child.

I agree on behalf of myself, my child(ren) named herein, or our heirs, successors, and assignees, to hold harmless and defend St. Theresa Parish, its officers, directors, employees and agents, and the Diocese of Phoenix, its employees and agents, chaperons, or representatives associated with the event, from any claim arising from or in connection with my child's participation in the program or event associated with the program, illness or injury (including death) or cost of medical treatment in connection therewith. I agree to compensate the parish, its officers, directors and agents, and the Diocese of Phoenix, its employees and agents and chaperons, or representatives associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from negligence of the parish/diocese

Medical Release: _____ (Parent Initials)

In the event of an illness, I request that a designated agent of St. Theresa Parish obtain medical treatment on my behalf for my child. I will not hold St. Theresa Parish, the Diocese of Phoenix, the teachers, church employees, chaperones, coaches, or volunteers responsible for any accident or injury.

Photo Release: _____ Approve (Parent Initials) or _____ Deny (Parent Initials)

I authorize that appropriate pictures of my child (ren) may be taken during activities. I hereby grant the use of and release to the Catholic Diocese of Phoenix and St. Theresa Parish the use of my child (ren)'s name or likeness, whether in still, motion pictures, audio and video tape, my child (ren)'s photograph and/or other reproduction of him/her including his/her voice and features with or without his/her name for any promotional purposes involving the diocese or parish/school, news or feature stories in The Catholic Sun or other media. These items may be used without limitation or reservation of any fee.

Behavior Agreement: _____ (Parent Initials)

I agree that the child(ren) named for registration will dress and act with respect; will use no verbal or physical abuse of self or others; will not have in their possession at any time alcohol, drugs, non-prescription drugs, or tobacco of any kind; will be responsible for their own belongings. I have spoken with my child (ren) and he/she has agreed to follow the guidelines set above.

REMINDERS:

1. Sacramental Policy of the Diocese of Phoenix –

Sacrament preparation must coincide with regular weekly attendance in the parish Religious Education classes. Students attending a Catholic School are waived from attending the weekly Religious Education classes. Sunday Mass attendance and participation in sacrament preparation classes are always expected.

2. Elementary Religious Education Class Placement and Class Changes Policy -

We try our best to place your child in your 1st choice of class on a first-come first-serve basis. Efforts are made to maintain a class capacity of a maximum of 15-20 students per class depending on the age group. Accommodations for class changes will only be considered in extreme cases.

By signing below I authorize that a copy of this form may be kept at St. Theresa Parish and used in case of emergency.

Mother/Father/Legal Guardian*

Date

* If in a shared custody situation, please provide either Parents Signatures or a letter from the other parent granting agreement for the child to participate.