

## St. Michael the Archangel Parish 2018-2019 Child/Youth Religious Education Registration

**Have you completed a parish registration form? Yes \_\_\_ No \_\_\_** **PLEASE NOTE:** If your family is not registered at St. Michael, you should either submit a \$50 check with this form or register with the parish. There is no charge for registering with the parish or for participation in the Religious Education Program for registered St. Michael families. Forms are online and in the church vestibule.

**Please check all applicable categories for your family:**

**Preschool through grade 6**

\_\_\_ 3-yrs, 4yrs, Kindergarten B (Sunday during 10:30 a.m. Mass)  
\_\_\_ Kindergarten A, Grades 1- 6 (Sunday 9:00 – 10:05 a.m.)

**High school options**

\_\_\_ JR High & HS Grades 7-12 (Sunday 6:30 PM – 8:00 p.m.)  
\_\_\_ High School Didache 9-12 (Wednesdays 5-6 p.m.)

**Please provide information below for each child enrolled in Religious Education. Use an additional form if you have more than four (4) children to enroll.**

1. \_\_\_\_\_ M  F  \_\_\_\_\_  
 Child/Youth full name Preferred name if different Grade (2018-19) Date of birth  
 Baptized? Yes \_\_\_ No \_\_\_ Church of Baptism \_\_\_\_\_  
 1st Rec/Communion? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_

2. \_\_\_\_\_ M  F  \_\_\_\_\_  
 Child/Youth full name Preferred name if different Grade (2018-19) Date of birth  
 Baptized? Yes \_\_\_ No \_\_\_ Church of Baptism \_\_\_\_\_  
 1st Rec/Communion? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_

3. \_\_\_\_\_ M  F  \_\_\_\_\_  
 Child/Youth full name Preferred name if different Grade (2018-19) Date of birth  
 Baptized? Yes \_\_\_ No \_\_\_ Church of Baptism \_\_\_\_\_  
 1st Rec/Communion? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_

4. \_\_\_\_\_ M  F  \_\_\_\_\_  
 Child/Youth full name Preferred name if different Grade (2018-19) Date of birth  
 Baptized? Yes \_\_\_ No \_\_\_ Church of Baptism \_\_\_\_\_  
 1st Rec/Communion? Yes \_\_\_ No \_\_\_ Confirmation? Yes \_\_\_ No \_\_\_

**For children not Baptized at St. Michael, submit a copy of each child's Baptismal record to the office.**

**Home Address:**

\_\_\_\_\_  
 Street or P.O. Box City State Zip Primary phone

**Children live with:**

\_\_\_ Both parents \_\_\_ Mother only \_\_\_ Father only Other: \_\_\_\_\_

**Parent Information**

\_\_\_\_\_  
 (Father or male guardian's name)

\_\_\_\_\_  
 (Mother or female guardian's name including Maiden name)

\_\_\_\_\_  
 (Father or male guardian's cell phone)

\_\_\_\_\_  
 (Mother or female guardian's cell phone)

\_\_\_\_\_  
 (Father or male guardian's email)

\_\_\_\_\_  
 (Mother or female guardian's email)

\_\_\_\_\_  
 (Father or male guardian's church affiliation)

\_\_\_\_\_  
 (Mother or female guardian's church affiliation)

**Signatures required on reverse side**

**Emergency Contacts (Not Parent or Guardian)**

Name	Phone Number	Name	Phone Number
------	--------------	------	--------------

**Special Circumstances:** Please list any information that will help teachers meet the individual needs of each child. Include learning difficulties, food allergies, chronic illness, physical challenges, etc. (This information is kept in strict confidence.)

**Please indicate areas in which you can help the Child Religious Education Program (Check all that apply):**

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> Pre-K-K Catechist   | <input type="checkbox"/> 1- 6 Catechist                     | <input type="checkbox"/> 7-8 Catechist     | <input type="checkbox"/> Sacrament Receptions (serve or donate food) |
| <input type="checkbox"/> Pre-K-K Substitute  | <input type="checkbox"/> Gr 1-6 Substitute                  | <input type="checkbox"/> Gr 7-8 Substitute | <input type="checkbox"/> Catechist Breakfast (one Sunday)            |
| <input type="checkbox"/> Pre-K Sunday Snacks | <input type="checkbox"/> CYO (Gr 9-12) Sunday Night Dinners | <input type="checkbox"/> Other _____       |  |

**Parent/Guardian Agreement**

I understand that I, as parent or legal guardian of all registered youth, am required to read the Parent Handbook provided by the Religious Education program of St. Michael. Handbooks are distributed to families at the beginning of the school year and are also available on-line. I understand that my child(ren) need(s) to observe the basic rules of conduct and adhere to rules stated in the handbook. I understand that failure to comply with rules stated in the family handbook could bring about disciplinary actions including, in extreme cases, dismissal of my youth from the catechetical program following a conference with the program director.

I understand that I am responsible for sharing the rules, regulations and other important information in this handbook with my child(ren).

Signature	Relation to youth
-----------	-------------------

**Photo Release**

On occasion, we may take photographs or videos of your child(ren) and include them in publications like the *Catholic Week* or the St. Michael website. Please sign below authorizing us to obtain, store, and use photographs or videos for limited public use. Photos are not distributed on social media unless it is a church closed group that parents consent to use.

Signature	Date
-----------	------

**Pick Up Authorization for Children in 3<sup>rd</sup> Grade and Below**

If your child is in the third grade or lower, it is mandatory that an older sibling or approved adult come to the classroom to pick up your child. Siblings must be in the fifth grade or higher to pick up a preschool child.

Please list any other adults who have permission to pick up your child(ren) in grades Pre-K- Gr. 3.

--	--

**Medical Release**

I agree on behalf of myself, my child named on this form, or our heirs, successors, and assigns, to hold harmless and defend St. Michael the Archangel Parish in Auburn, its officers, directors, employees, and agents, and the Archdiocese of Mobile, its employees and agents, chaperones, or representatives associated with the Religious Education program, from any injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors, and agents, and the Archdiocese of Mobile, its employees and agents and chaperones, or representative associated with the Archdiocese 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 the negligence of the parish or Archdiocese.

Signature	Date
-----------	------