



**2011 – 2012 ST. VINCENT DE PAUL RELIGIOUS EDUCATION REGISTRATION**

**Use for Sunday School, Grapevine, EDGE & Life Teen Programs**

**\*\* All Programs are handicap accessible \*\***

**FAMILY INFORMATION**

**Registered in the Parish** Yes  No

Date: \_\_\_\_\_

Parent/Guardian Names: \_\_\_\_\_

If child does not live with parents please indicate relationship: \_\_\_\_\_

Home address: \_\_\_\_\_  
Street Apt #

\_\_\_\_\_ City Zip

EMAIL, Please print clearly. We will use this as a primary way to keep you up to date on program information.

\_\_\_\_\_ Parent/Guardian email Students in Grade 6-12 email

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

In case of an emergency, and we are unable to reach you, please list an emergency contact that we may release your child to.

Name \_\_\_\_\_ Relationship to child \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ / (\_\_\_\_) \_\_\_\_\_

Please complete the following for each child you are registering, preschool through 12th grade.

Name Child Goes by: \_\_\_\_\_ Sex \_\_\_\_\_ Birth date \_\_\_\_\_ Grade \_\_\_\_\_ School child attends \_\_\_\_\_  
Please note last name \_\_\_\_\_  
If different from above. \_\_\_\_\_ M or F \_\_\_/\_\_\_/\_\_\_

Has your child received the following sacraments? **Baptism** Y N **1st Reconciliation** Y N **1st Eucharist** Y N **Confirmation** Y N

**Please note any medical concerns, special needs or requests (ex. allergies, hearing impairment, learning accommodations etc.)**

Name Child Goes by: \_\_\_\_\_ Sex \_\_\_\_\_ Birth date \_\_\_\_\_ Grade \_\_\_\_\_ School child attends \_\_\_\_\_  
Please note last name \_\_\_\_\_  
If different from above. \_\_\_\_\_ M or F \_\_\_/\_\_\_/\_\_\_

Has your child received the following sacraments? **Baptism** Y N **1st Reconciliation** Y N **1st Eucharist** Y N **Confirmation** Y N

**Please note any medical concerns, special needs or requests (ex. allergies, hearing impairment, learning accommodations etc.)**

Name Child Goes by: \_\_\_\_\_ Sex \_\_\_\_\_ Birth date \_\_\_\_\_ Grade \_\_\_\_\_ School child attends \_\_\_\_\_  
Please note last name \_\_\_\_\_  
If different from above. \_\_\_\_\_ M or F \_\_\_/\_\_\_/\_\_\_

Has your child received the following sacraments? **Baptism** Y N **1st Reconciliation** Y N **1st Eucharist** Y N **Confirmation** Y N

**Please note any medical concerns, special needs or requests (ex. allergies, hearing impairment, learning accommodations etc.)**

Name Child Goes by: \_\_\_\_\_ Sex \_\_\_\_\_ Birth date \_\_\_\_\_ Grade \_\_\_\_\_ School child attends \_\_\_\_\_  
 Please note last name \_\_\_\_\_  
 If different from above. \_\_\_\_\_ M or F \_\_\_/\_\_\_/\_\_\_

Has your child received the following sacraments? **Baptism** Y N **1st Reconciliation** Y N **1st Eucharist** Y N **Confirmation** Y N

**Please note any medical concerns, special needs or requests (ex. allergies, hearing impairment, learning accommodations etc.)**

**PERMISSION TO PHOTOGRAPH**

**YES I hereby grant permission for my child/children to be photographed and/or videotaped** during Religious Education activities and events. I understand that my child may decline to be photographed and/or videotaped at any time. I further grant permission for the resulting photographs and/or videotaped footage to be edited, if necessary, published and/or broadcasted for the purpose of promoting the Religious education programs at St. Vincent de Paul Parish.

Name (PLEASE PRINT) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**NO I hereby decline to grant permission for my child/children to be photographed and/or Videotaped** during Religious Education activities and events. I have instructed my child/children to decline to be photographed and/or videotaped at all times. *I have further instructed my child/children to notify Religious Education coordinators and leader that he/she may not be photographed and or videotaped under any circumstances.*

Name (PLEASE PRINT) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**CLASS TIMES, FEES AND INFORMATION**

**Class times are as follows...**

Sunday School (3 yrs. through K)	Sunday during the 10:00 a.m. Mass (First Day is October 2nd)
Grapevine (Grades 1 thru 5)	Monday evening 6:00 to 8:00 p.m.(First Day is October 3rd beginning with a 5pm family BBQ)
Edge (Grades 6 thru 8)	Sunday evening 6:00 to 8:00 p.m. (Kick Off is October 2nd after Mass)
Life Teen (Grades 9 thru 12)	Sundays 6:00 to 8:00 p.m. (Kick Off is October 2nd after Mass)
Sacraments (Grades 2-12)	Times vary depending on age and Sacrament. (separate registration required)

**FAITH FORMATION FEES:**

1 child	\$60.00
2 children	\$70.00
3 or more children	\$80.00

**Please do not write in this space, it is for office records. Amount Paid:**

DATE: \_\_\_\_\_ CK# \_\_\_\_\_ Cash: \_\_\_\_\_ Balance Due: \_\_\_\_\_ Notes: \_\_\_\_\_

DATE: \_\_\_\_\_ CK# \_\_\_\_\_ Cash: \_\_\_\_\_ Balance Due: \_\_\_\_\_ Notes: \_\_\_\_\_

DATE: \_\_\_\_\_ CK# \_\_\_\_\_ Cash: \_\_\_\_\_ Balance Due: \_\_\_\_\_ Notes: \_\_\_\_\_

DATE: \_\_\_\_\_ CK# \_\_\_\_\_ Cash: \_\_\_\_\_ Balance Due: \_\_\_\_\_ Notes: \_\_\_\_\_

DATE: \_\_\_\_\_ CK# \_\_\_\_\_ Cash: \_\_\_\_\_ Balance Due: \_\_\_\_\_ Notes: \_\_\_\_\_

DATE: \_\_\_\_\_ CK# \_\_\_\_\_ Cash: \_\_\_\_\_ Balance Due: \_\_\_\_\_ Notes: \_\_\_\_\_

DATE: \_\_\_\_\_ CK# \_\_\_\_\_ Cash: \_\_\_\_\_ Balance Due: \_\_\_\_\_ Notes: \_\_\_\_\_

REGISTRATION FORMS MAY BE DROPPED OFF IN THE PARISH OFFICE 9am-3:30pm  
 OR placed in the black box located outside the parish office.