



St. James Catholic Church Faith Formation Registration Form 2020-2021

CHILD'S INFORMATION

Name of Child: _____
First M.I. Last

Gender: M F Date of Birth: _____ Grade: _____

Address: _____
Street

City State Zip Code

Has your child celebrated the Sacrament of Baptism? _____ Yes _____ No
Has your child celebrated the Sacrament of Confession? _____ Yes _____ No
Has your child celebrated the Sacrament of Communion? _____ Yes _____ No

PARENT/GUARDIAN INFORMATION

Name of Mother: _____

Phone: (h) _____ (c) _____ (w) _____

Best number and best time to call: _____

Name of Father: _____

Phone: (h) _____ (c) _____ (w) _____

Best number and best time to call: _____

Child resides with: Mother Father Both Other

Email address of one parent: _____

EMERGENCY CONTACT INFORMATION/ALTERNATIVE RELEASE

Alternate/Emergency Contact (not parent): _____

Phone: (h) _____ (c) _____ (w) _____

If applicable

To whom we may release child: (other than biological parent or legal guardian)?

Name of Adult: _____

Phone: (h) _____ (c) _____ (w) _____

HEALTH INFORMATION

Health Issues/Medications/Conditions/Special Concerns:

Catechist and aides will not distribute medication (prescription or non-prescription).

PERMISSIONS

(Parent's/Guardian's initials required below)

Photo/Video Consent and Release. I hereby authorize St. James Church to take photographs, recordings, and/or videos (whether electronic, digital, or otherwise) of Participant in connection with the activities, and I hereby consent to the use, reproduction, and publication of such images by St. James Church in connection with the promotion and publicity of the activities of St. James Church, including, without limitation, publication of such images on St. James Church's website, media, etc. I, individually and in my capacity as parent/legal guardian of Participant, hereby waive any right to inspect or approve the actual use by St. James Church of any such image of Participant. Such images of Participant shall be the sole property of St. James Church, and I, individually and in my capacity as parent/legal guardian of Participant, acknowledge and agree that neither I nor Participant shall be entitled to any compensation whatsoever should any such images of Participant be used by St. James Church

Initials

Formation During Pandemic. I hereby authorize St. James Church to catechize using virtual means as a result of shutdown during peaks of Covid-19. If online instruction is not utilized, I understand packets and/or books may be sent home for the duration of closure. I understand that masks, temp checks, social distancing, and other appropriate measures will be utilized during the pandemic to ensure the safety of all.

Initials

WAYS TO HELP

Will you help with the faith formation of our children?

____ Catechist ____ Catechist Aide ____ Substitute Catechist
____ Parent Session refreshments ____ Soup Supper/Stations of Cross

FAITH FORMATION DONATION

*We ask a donation to help defray costs of the Faith Formation Program (books, supplies, utilities).
The donation is \$30 per child. **No child will be excluded from attending Faith Formation classes.**
We can work with you, make payment arrangements or find scholarship money if you need this.*

____ ***Yes, attached is our gift to support faith formation in St. James Parish.***

____ ***Cash \$30 per child***

____ ***Check # _____ \$30 per child***

PARENT/GUARDIAN SIGNATURE

Signature of one parent: _____ Date: _____