St. Peter's Faith & Life 2017-2018 Registration

STUDENT INFORMATION

| "lail d'a Nama | | | | Condent Mala Famala |
|--|---|--|--|--|
| child's Name | (First | Middle | Last) | Gender: Male Female_ |
| Child's Street | Address | | | School |
| | | | | Grade in Fall 2017 |
| • | • | d Both | | Age Birth Date// |
| Church of Bapt | ism: | | Church of First | Communion: |
| | union: Parents | must bring a copy o | f their Baptism c | ertificate to Kitty Metz at the time of |
| <u>registration.</u> ***Confirmatio | n: Darente mi | et bring in a copy of | thair Rantiem an | d First Communion certificates to Kitty |
| the time of reg | | isi biling in a copy of | <u>ıneli baptısm an</u> | a riisi Communion Cernificates to Kitty |
| | | | | |
| | | PRIMARY PAREN | IT/GUARDIAN | INFORMATION |
| | | | | |
| Nother's Name | | | | Cell Number |
| | (First | Maiden Name | Last) | |
| Eathan's Name | | | | Cell Number |
| arners name_ | | Middle Name | Last) | Cell Indiffuer |
| | | MIGGIC INGINE | Lu31) | |
| | (1 11 31 | | | |
| Parent's E-Mail | · | | | |
| Parent's E-Mail | · | | ease Print Clearl | у) |
| Parent's E-Mail | · | | | , , |
| Parent's E-Mail | · | | | у) |
| ~~~~~ | Address | (Pl | OFFICE USE | , , |
| ~~~~~ | Address | (Pl | ~~~~~~~ <i>O</i> FFICE USE 0 3 <i>C</i> h | ildren= \$90 |
| ~~~~~ | Address | (Pl | OFFICE USE O 3 Ch | ildren= \$90 |
| ~~~~~ | Address ~~~~~~ Child= \$40 ***Non-Par | (Pl | OFFICE USE O 3 Ch .25 per child (R | ildren= \$90 4 Children= \$120 etreat included) |
| ~~~~~~ 1 <i>C</i> | Address ***Non-Par Church | (Pl 2 Children= \$6 Confirmation= \$1 ishioners: Release le | OFFICE USE O 3 Ch 25 per child (R tter from Pasto | ildren= \$90 |
| ~~~~~~ 1 <i>C</i> | Address ***Non-Par Church | (Pl | OFFICE USE O 3 Ch 25 per child (R tter from Pasto | ildren= \$90 |
| ~~~~~ 1 <i>C</i> Other Childrer | Address hild= \$40 ***Non-Par Church | (Pl 2 Children= \$6 Confirmation= \$1 ishioners: Release le | OFFICE USE OFFICE USE O 3 Ch 25 per child (R tter from Pasto City | ildren= \$90 |
| ~~~~~ 1 <i>C</i> Other Childrer | Address hild= \$40 ***Non-Par Church | (Pl 2 Children= \$6 Confirmation= \$1 ishioners: Release le | OFFICE USE OFFICE USE O 3 Ch 25 per child (R tter from Pasto City | ildren= \$90 |

St. Peter's Catholic Church Youth Liability Policy

| I herby consent to the participation of my child, | , for any activity that St. Peter's |
|--|--|
| Catholic Church sponsors under the supervision of the Education/Yo | |
| transportation may be via bus or CORE team chaperone vehicles to a | and from the given destinations. I also |
| discharge any drivers from any form of injury associated with drivir | ng my child to the activity. |
| In conjunction with the paragraph above, I also release forever, disc | charge and agree, to not hold St. Peter's |
| Catholic Church, and the Diocese of Lafayette accountable for any I | iability claims, demands, lawsuits, and expenses |
| arising from personal, personal, or emotional injuries, sickness, deat | h, or property damage of any nature |
| whatsoever; which may be incurred or suffered by my child while at | tending or working with any activities |
| sponsored by St. Peter's Catholic Church/Diocese of Lafayette. | |
| Also, I allow the Education/Youth Ministry Team to use any photos t | taken during any activities to be used lawfully |
| for advertising, promotion, and media purposes. | |
| If the participant is under 18 years of age: I, the parent or legal guarantees | ardian of the minor child listed above, grant |
| permission for my child to participate fully in any activity sponsored | by St. Peter's Catholic Church/Diocese of |
| Lafayette and all of its undertakings. | |
| | |
| ***No phones will be allowed during class or at activities. Phones wi class/activity. | ll be collected before and returned after |
| ***Child's Known Allergies: | |
| ***Child's Special Needs/Conditions: | |
| | |
| ***According to the Diocese of Lafayette, for the safety of all of a | our students, parents will not be allowed to sit |
| in on any classes <u>unless</u> there is a specific need previously discussed you, please schedule an appointment with Kitty at 465-2164. That p | · |
| trained prior to attending class. | |
| | |
| Parent's Signature Dat | to |



The Diocese of Lafayette Parental or Guardian Permission for Direct Contact with Minors

PART I

Ministry/Parish/School/Organization Name: St. Peter's School of Religion

Name of Contact/Coordinator: Kitty Metz

Ministry/Parish/School/Organization Communicates via: Cell Number: FLOCK NOTES (1-410-200-+)

Email Address: kitty@stpetersofnewiberia.com

Social Networking Site(s): Face Book, Church Website (www.stperersofnewiberia.com), and Church Bulletin

PART II

| > Parent or Guardian Completes | |
|--|--|
| \square You MAY NOT contact my child directly. (Sign | and return.) |
| \square You MAY contact my child directly. (Complete a | all sections below, sign and return.) <u>PARENT'S PHONE</u> |
| Name (Parent/Guardian): | of Minor Child(ren) |
| | ollowing methods: Phone call/voice message to this telephone |
| SMS/text message to this telephone number: (PAREN | T'S PHONE) |
| Social networking site sponsored by group named: Fac | ce Book, St. Peter's website, Church Bulletin |
| Email to this address: | |
| Parent/Cuardian Signature | Date |



${\mathcal D}$ iocese of ${\mathcal L}$ afayette

PHOTOGRAPH/VIDEO/AUDIO/MEDIA CONSENT & RELEASE FORM FOR A MINOR (UNDER 18 YEARS OF AGE)

| I, | , parent/guardian of | , hereby consent to and |
|---|--|--|
| authorize the Roman Catholic Dioces | e of Lafayette, Louisiana, (the Diocese) a | and all entities, representatives, employees, |
| and agents operating under its author | ity to record, use, edit, reproduce, and/o | or publish photographs, video, audio, and/or |
| other media that may portray and/or r | relate to the aforementioned minor child | l, his/her image, likeness and/or voice, |
| without compensation. I understand t | hat these materials may be used in vario | ous print and electronic media, including |
| but not limited to the Diocesan websi | te and the Diocesan publication, Acadian | na Catholic, and/or for other endeavors |
| related to Diocesan interests. I unders | tand that the Diocese may use and/or pu | ublish materials relating to the |
| aforementioned minor child and/or us | e his/her photograph, voice, video image | es, and other media relating to said minor |
| child in any manner that the Diocese o | leems appropriate in order to promote a | and/or publicize its programs, or for any |
| other lawful purpose. This authorizat | ion shall not expire and will remain effe | ective indefinitely until rescinded in writing |
| SIGNATURE/DATE: | | |
| PRINTED NAME/PHONE: | | |