

St. Paul's RE and Youth Registration Form 2019-2020

ONE FORM PER FAMILY - Please Complete Both Sides and PRINT CLEARLY!

- The Registration Form must be filled out completely and the Payment included.
- A copy of the child's Baptism Certificate must also be included for all children and youth preparing for First Reconciliation, First Eucharist and Confirmation.

Family Last Name _____ Contact Phone _____ Member of St. Paul's? YES__NO__

Address _____ City _____ Zip _____

Preferred method of communication Email__ Phone__

Parent/Guardian & Emergency Contact Information (Youth information on other side)

Parent/Guardian First/Last Name	Relationship to Child(ren)	E-mail Address	Home Phone	Cell Phone
Emergency Contact	Relationship to Child(ren)	E-mail Address	Home Phone	Cell Phone

Parish Family Agreement (Please read and sign)

Where do you attend church? _____

Discipleship calls us to more than membership; it calls us to be active participants in our parish. We are called to recognize God's abundant blessings and our obligation to manage those wisely.

ACTIVE PARISHIONER

- Member of St. Paul's
- Regular Mass attendance on Sundays and Holy Days of Obligation at St. Paul's Parish.
- At least one adult member of the household is committed and active in at least one parish ministry.
- I reaffirm my commitment to be a good example through my actions. I ask the support of my parish in nurturing my faith as I strive to form my children as disciples through Catholic education. I pledge my cooperation with the parish and its ministries, and will make every effort to supervise my children's commitment as well.

Parent/Guardian Signature: _____ Date: _____

Permission Release (Please read and sign)

- I do hereby give permission for my child(ren) to participate in St. Paul's Religious Education programs. I agree to hold the Diocese of Boise, St. Paul's parish, staff and volunteers free from liability for any illness or injury that might be incurred by my child(ren) during these events. Should any injury occur, I hereby give my permission for my child(ren) to receive treatment from a physician to be selected by a St. Paul's staff member if s/he is unable to reach me or my family physician.
- I understand that St. Paul's parish, staff and volunteers are not responsible for my child(ren)'s transportation to and from St. Paul's RE and Youth Ministry events. Nor is St. Paul's parish, staff, or volunteers responsible for my child(ren) should they leave the immediate area where the event is taking place or choose to stay after an event has taken place.
- I give St. Paul's permission to use photographs/videos which include my child(ren) in Parish related communications.

Parent/Guardian Signature: _____ Date: _____

Volunteers are the heart and soul of the Faith Formation Programs. Your time and talents are needed!

- I am interested in volunteering for the following age group(circle preferences): Pre-K/K Elementary Jr. High Sr. High Confirmation Preparation

Name and e-mail address of volunteer: _____

RE and Youth Class Sessions:

<p>PreK4/K-5th A - Sunday (10:50 – 11:45 am) B – Wednesday (4:30-5:30pm) C - Wednesday (6:30-7:30 pm)</p> <p>FEE: \$35/child \$90/Family</p> <p><i>(Must be 4 & 5 by Sept. 1st and potty trained.)</i></p>	<p>Middle School: 6th – 8th D - Wednesday (6:30 - 8 pm)</p> <p>FEE: \$35/youth \$90/Family</p>	<p>High School : 9th – 12th grade E – Sunday (2:00-3:30)</p> <p>FEE: \$35/youth \$90/Family</p>	<p>Sacramental Prep 6th – 12th grade F – High School* - 2nd Sunday of every month F – Middle School* - 2nd Tuesday of every month</p> <p>*all youth in sacramental prep must attend youth group</p>	<p>Sacraments First Reconciliation/First Communion, & RCIA for Elementary: For children 2nd – 5th grade. Contact: Marisela Linan, mlinan@stpaulsnampa.org</p> <p>First Communion, RCIA for Middle School: For youth entering 6th – 8th grade. Contact: Stephanie Craig, scraig@stpaulsnampa.org</p> <p>First Communion, Confirmation & RCIA for High School: For youth entering 9th- 12th grade. Contact: Stephanie Craig, scraig@stpaulsnampa.org</p>
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Child/Youth Information:

Please list Class Session code letter below:	Last Name <i>(List additional children on another sheet of paper.)</i>	First Name	M/F	Birth Date M/D/Y	Grade Fall, 2019	Was This Child in the program last year? If yes what month/year?	Check Sacraments RECEIVING THIS YEAR			
							Baptism	Reconciliation /Eucharist	Confirmation	
Any medical conditions we need to be aware of? If yes please specify below										
Child/Youth:										
Child/Youth:										

Registration Fees/Payment Information
 If a payment plan is needed, forms are available. Please contact the Finance Department in the Main Office and they will be happy to assist you.

Total \$ for children registering: Elementary _____ + Jr. High _____ + Confirmation prep _____ + High School Youth Ministry _____ = \$ _____ TOTAL AMOUNT DUE

FEES: See fees above.

\$ _____ TOTAL ENCLOSED

Payment (Enter Amount & Type of Payment): Cash \$ _____ Check (Made Out To St. Paul's) \$ _____ Credit Card: MC Visa Discover Amex (Please circle card type and use table below)

OFFICE USE Date Rec'd _____
Amount Rec'd \$ _____
CK# _____ CA CC Initial _____
Payment Schedule Yes No