

Religious Education + Sacraments

St. Francis of Assisi Parish

REGISTRATION FORM

2017-2018 School Year

This Form must be completed and executed for participation in the RELIGIOUS EDUCATION Activities as a part of registration.

Parent/Family Information (please print)

Participant resides with (check all that applies): Father _____ Mother _____ Guardian _____

Mail To: Family Name _____

Father/Guardian _____ **Mother (Maiden Name)/ Guardian** _____

Home Address _____ **City/State** _____ **Zip** _____

Home Phone: _____ **Cell Phones: (Dad)** _____ **(Mom)** _____

Email Address (es) _____

Registered Members of St. Francis? Yes _____ No _____, if no –registered Church _____

STUDENT INFORMATION (Please print)

1. **Student's Name:** _____ **Common Name** _____

Birth Date: _____ Age: _____ Gender: _____ School _____ Grade _____

Primary language of Student: English _____ Spanish _____ Both _____

Ethnic Origin of Student: Asian _____ Black _____ Hispanic _____ Caucasian _____ Other _____

Sacraments Received _____ **Baptism** _____ **Eucharist** _____ **Reconciliation** _____ **Confirmation** _____

2. **Student's Name:** _____ **Common Name** _____

Birth Date: _____ Age: _____ Gender: _____ School _____ Grade _____

Primary language of Student: English _____ Spanish _____ Both _____

Ethnic Origin of Student: Asian _____ Black _____ Hispanic _____ Caucasian _____ Other _____

Sacraments Received _____ **Baptism** _____ **Eucharist** _____ **Reconciliation** _____ **Confirmation** _____

3. **Student's Name:** _____ **Common Name** _____

Birth Date: _____ Age: _____ Gender: _____ School _____ Grade _____

Primary language of Student: English _____ Spanish _____ Both _____

Ethnic Origin of Student: Asian _____ Black _____ Hispanic _____ Caucasian _____ Other _____

Sacraments Received _____ **Baptism** _____ **Eucharist** _____ **Reconciliation** _____ **Confirmation** _____

4. **Student's Name:** _____ **Common Name** _____

Birth Date: _____ Age: _____ Gender: _____ School _____ Grade _____

Primary language of Student: English _____ Spanish _____ Both _____

Ethnic Origin of Student: Asian _____ Black _____ Hispanic _____ Caucasian _____ Other _____

Sacraments Received _____ **Baptism** _____ **Eucharist** _____ **Reconciliation** _____ **Confirmation** _____

Photo Release Form: I grant to St. Francis of Assisi Parish, the right to take photographs of me and my family in connection with the Religious Education, Youth Activities, retreats, etc. I authorize St. Francis of Assisi Parish, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that St. Francis of Assisi Parish may use such photographs of me with or without my name and for any lawful purpose, following the Archdiocese of Oklahoma City Safe Environment guidelines, including such purposes as publicity, illustration, advertising, and Web content. I have read and understand the above.

Parent Signature _____ Date _____

On Sunday, October 8, 2017, the children will be offered the “Circle of Grace” program. The program is designed to educate and empower children to actively participate in a safe environment for themselves and others.

_____ Yes, my child (ren) may participate in the Circle of Grace Program

_____ No, my child (ren) will **NOT** participate in the Circle of Grace Program

Refusal of Safe Environment Lessons for Youth

This statement is only if you do **NOT** want your child (ren) to participate in the Safe Environment lessons offered on October 8, 2017 in the Religious Education classes. I have read the letter explaining the Archdiocesan policy regarding Safe Environment for children and do **NOT** want my child (ren) to receive this training.

Printed Name _____ Date _____

Signature _____

Payment for RE: \$25. per child or \$50. per family

Please make checks out to St. Francis of Assisi Parish

Payment in form of _____ check /or _____ cash

Date received _____