



# Saint Lucy Parish Faith Formation Ministries

## Registration Form 2016-2017

Student Name: \_\_\_\_\_ M  F  DOB \_\_\_/\_\_\_/\_\_\_  
 City of Birth: \_\_\_\_\_ State \_\_\_ Country \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_ (In Sept. 2016)  
 Student Lives with \_\_\_\_\_ Student preferred language \_\_\_\_\_ Religion \_\_\_\_\_  
 Registered Parishioner at St. Lucy? YES  NO  Parish you regularly attend: \_\_\_\_\_

*Please indicate which Sacraments are needed and provide a certificate copy of the sacraments already received*

Baptized           1<sup>st</sup> Communion           Confirmation

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
STREET                                      APT. #                      CITY                      STATE                      ZIP

Mother's Name: \_\_\_\_\_ Religion \_\_\_\_\_  
 Baptized    1<sup>st</sup> Communion    Confirmed   Marital Status: \_\_\_\_\_ Preferred language \_\_\_\_\_  
 Cell \_\_\_\_\_ Email \_\_\_\_\_

Father's Name: \_\_\_\_\_ Religion \_\_\_\_\_  
 Baptized    1<sup>st</sup> Communion    Confirmed   Marital Status: \_\_\_\_\_ Preferred language \_\_\_\_\_  
 Cell \_\_\_\_\_ Email \_\_\_\_\_

### SPANISH PROGRAMS

1.  Sundays: 1<sup>st</sup> to 6<sup>th</sup> grade   or    Tuesdays: 1<sup>st</sup> to 6<sup>th</sup> grade        YEAR 1    YEAR 2    ONGOING

### ENGLISH PROGRAMS

2.  Sundays: Preschool 3 & 4 year olds only

NOTE: PRE-K AND KINDER DO NOT COUNT TOWARDS TWO YEAR SACRAMENTAL PREPARATION.

3.  Sundays: Kindergarten

4.  Sundays: 1<sup>st</sup> - 6<sup>th</sup> grade   or    Wednesdays: 1<sup>st</sup> - 6<sup>th</sup> grade.        YEAR 1    YEAR 2    ONGOING

5.  Thursdays: 7<sup>th</sup> - 8<sup>th</sup> grades – First Communion Preparation     YEAR 1     YEAR 2

6.  Tuesdays: 9<sup>th</sup>-12<sup>th</sup> grade

a. Confirmation  YEAR 1     YEAR 2

b. First Communion  YEAR 1     YEAR 2

HIGH SCHOOL STUDENTS- CHECK ALL THAT APPLY:

- Christian School     Faith Formation-Other Parish     Home School     Quinceañera  
 Catholic School     Previous St. Lucy Sacramental Prep.     Previous Edge/ LIFE TEEN

### JUNIOR HIGH AND HIGH SCHOOL ONGOING FAITH FORMATION PROGRAMS

7.  Mondays: 6<sup>th</sup> -8<sup>th</sup> grade EDGE YOUTH MINISTRY

8.  Sundays: 9<sup>th</sup> - 12<sup>th</sup> grade LIFE TEEN YOUTH MINISTRY        ENGLISH     SPANISH

Please notify the Director of the Program immediately if there are changes to the information on registration

# EMERGENCY INFORMATION & RELEASE FORM

## LIST NAMES OF PERSONS TO CONTACT IN CASE OF EMERGENCY (OTHER THAN PARENT)

1. \_\_\_\_\_  
NAME HOME PHONE CELL PHONE RELATIONSHIP

2. \_\_\_\_\_  
NAME HOME PHONE CELL PHONE RELATIONSHIP

## HEALTH INFORMATION

Does the student have any unusual health conditions? YES  NO

If YES, please explain: \_\_\_\_\_

Please explain if the student has learning disabilities: \_\_\_\_\_

Doctor \_\_\_\_\_ Phone \_\_\_\_\_ Medical Insurance Info. (Group #, etc.) \_\_\_\_\_

## PHOTO RELEASE CONSENT

Occasionally pictures are taken of children and youth ministry events and gatherings. We would like to be able to use these photographs for newsletters, flyers, and the Parish Web Site. We will not use any last names if posted. Concerns about published pictures should be expressed to writer/webmaster and will be promptly dealt with. I/We the parent(s) of this student, authorize and give full consent, without limitation or reservation, to St. Lucy Faith Formation to publish any photographs in which the above named student and/or his/her parent /grandparents appears while participating in any program with St. Lucy's Faith Formation. No compensation is to be given.

Guardian/Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

## RELEASE & MEDICAL CONSENT

If emergency treatment is required and parents or legal guardian cannot be reached immediately, your signature in the space below empowers the Director of Faith Formation, or their representative, to exercise prudent judgment in providing medical services for your child. As protected by Federal law, confidential information will not be released.

Guardian/Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

### Office Use Only:

Completed 1 yr. Sacramental Preparation other Parish

Baptism Certificate:

1<sup>st</sup> Communion Cert:

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_