

**ST ANN'S RELIGIOUS EDUCATION/YOUTH MINISTRY PROGRAM  
2026-2027 REGISTRATION FORM**

DATE: \_\_\_\_\_

FAMILY NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

HOME PHONE: \_\_\_\_\_

REGISTERED PARISHIONER? YES NO  
YEAR REGISTERED: \_\_\_\_\_ Circle one

PRIMARY EMAIL: \_\_\_\_\_

*St. Ann's RE/YM Office will communicate via email in most cases. Please designate a primary email address above to receive all notices via RE-Mail.*

MOTHER/LEGAL GUARDIAN: FULL NAME \_\_\_\_\_ MAIDEN NAME \_\_\_\_\_

E-MAIL \_\_\_\_\_ RELIGION \_\_\_\_\_ OCCUPATION \_\_\_\_\_

PLACE OF EMPLOYMENT \_\_\_\_\_ BUS. PHONE \_\_\_\_\_ MARITAL STATUS: MARRIED \_\_\_\_\_ SEPARATED \_\_\_\_\_

DIVORCED \_\_\_\_\_ REMARRIED \_\_\_\_\_ DECEASED \_\_\_\_\_ SINGLE \_\_\_\_\_ CHILD(REN) LIVE WITH: BOTH PARENTS ( ) FATHER ( ) MOTHER ( ) GUARDIAN ( )

Mother's Signature: \_\_\_\_\_

FATHER/LEGAL GUARDIAN: FULL NAME \_\_\_\_\_

E-MAIL \_\_\_\_\_ RELIGION \_\_\_\_\_ OCCUPATION \_\_\_\_\_

PLACE OF EMPLOYMENT \_\_\_\_\_ BUS. PHONE \_\_\_\_\_ MARITAL STATUS: MARRIED \_\_\_\_\_ SEPARATED \_\_\_\_\_

DIVORCED \_\_\_\_\_ REMARRIED \_\_\_\_\_ DECEASED \_\_\_\_\_ SINGLE \_\_\_\_\_ CHILD(REN) LIVE WITH: BOTH PARENTS ( ) FATHER ( ) MOTHER ( ) GUARDIAN ( )

Father's Signature: \_\_\_\_\_

EMERGENCY CONTACT PERSON: FULL NAME \_\_\_\_\_ RELATIONSHIP TO CHILD \_\_\_\_\_

PHONE (REACHABLE ON SUNDAYS): \_\_\_\_\_ OCCUPATION \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

**PLEASE LIST ANY SPECIAL NEEDS, MEDICATIONS, ALLERGIES AND/OR DISABILITIES THAT MAY PERTAIN TO YOUR CHILD/CHILDREN:**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ Yes, I hereby grant permission for St. Ann REYM to request a copy of my child/children's Baptism certificate from St. Ann's Rectory. (If child was baptized at St. Ann Church). (Please check.)

SURVEY FOR PARENT SUPPORT	RE/YM REGISTRATION FEES	PAYMENT TOTAL
<p>PLEASE CHECK AS MANY ITEMS BELOW WHICH YOU CAN PARTICIPATE IN... MAHALO!</p> <p>SPECIAL EVENTS:</p> <p>____ Parent Workday</p> <p>____ Special Church events</p> <p>____ Retreat Volunteer/Chaperone</p> <p>____ RE Office/Clerical Support</p> <p>____ OTHER _____</p>	<p>1<sup>ST</sup> CHILD: \$40.00, 2<sup>ND</sup> CHILD: \$ 30.00, EACH ADDITIONAL CHILD: \$20.00</p> <p>YM T-SHIRT – REQUIRED: \$ 10.00 (6<sup>TH</sup>- 8<sup>TH</sup> GRADE STUDENTS)</p> <p>YM T-SHIRT-REQUIRED: \$10.00 (HIGH SCHOOL STUDENTS)</p> <p>PLEASE CIRCLE YM SHIRT SIZE (Adult sizes only): S M L XL OR XXL</p>	<p>____ REG. FEES</p> <p>____ YM T-SHIRT</p> <p>____ DONATION</p> <p>____ TOTAL FEES</p>
<div style="border: 1px solid black; padding: 5px;"> <p><b>ST. ANN CHURCH &amp; REYM RESERVES THE RIGHT TO USE STUDENT PICTURES IN PUBLICATIONS AND ON THE CHURCH WEBSITE. THE RELIGIOUS EDUCATION OFFICE MUST HAVE ON FILE A WRITTEN NOTICE FROM ANY PARENT PROHIBITING THE USE OF THEIR CHILD'S PICTURE IN RE/YM PUBLICATIONS AND WEBSITE. SUCH NOTICE MUST BE RECEIVED BY SUNDAY, SEPTEMBER 20, 2026.</b></p> </div>	<p><b>FUNDRAISER SUPPORT: I WOULD LIKE TO HELP BY:</b></p> <p>PLEASE INDICATE IF YOU WOULD LIKE TO HELP SUPPORT OUR RE/YM PROGRAM BY EITHER MAKING A \$30 DONATION PER CHILD OR SELLING A FUNDRAISER PRODUCT IN LIEU OF DONATION.</p> <p>____ Each child to participate in a Fundraiser Program to begin in September (more details to come.)</p> <p>____ or by making a donation of \$30 per child</p> <p><b>**No child will be refused registration because of cost. Please see cashier for details.</b></p>	<p><b>FOR OFFICE USE:</b></p> <p>____ CASH ____ CHK #</p> <p>____ WAIVER (CA or FA)</p> <p><b>Please make checks payable to St. Ann Religious Education</b></p>

<b>STUDENT LEGAL NAME:</b> _____ STUDENT IS ... RETURNING (FROM 2025-26) _____ NEW: _____ <b>*IF NEW, PLEASE ANSWER THE FOLLOWING:</b> -HAS YOUR CHILD RECEIVED ANY PREVIOUS RELIGIOUS EDUCATION? YES _____ NO _____ <b>*IF YES, PLEASE INDICATE PARISH:</b> _____ YEAR(S) ENROLLED _____ GRADE LEVEL(S) COMPLETED: _____	BIRTHDATE	AGE	<b>OFFICE USE:</b> SACRAMENTS IN 2026-2027: YES _____ NO (CIRCLE ONE) _____  BIRTH CERT. RCVD: _____ BAPT. CERT. RCVD: _____  PARISH REG. VER: _____  <b>CLASS PLACEMENT:</b>
	CURRENT SCHOOL	GRADE IN THE FALL, 2026:	
<b>CATHOLIC BAPTISM:</b> HAS YOUR CHILD RECEIVED A CATHOLIC BAPTISM? YES _____ NO _____ IF NO, LIST RELIGION OF BAPTISM: _____	CHURCH OF BAPTISM	CITY & STATE	DATE OF BAPTISM

IF YOUR CHILD IS PREPARING TO RECEIVE ANY SACRAMENTS IN 2026-2027. PUT A CHECK NEXT TO THE APPROPRIATE SACRAMENT(S) BELOW:

BAPTISM \_\_\_\_\_ CONFIRMATION \_\_\_\_\_ 1<sup>ST</sup> RECONCILIATION / 1<sup>ST</sup> EUCHARIST \_\_\_\_\_

My child has received 1<sup>st</sup> Reconciliation /Eucharist. Church \_\_\_\_\_ City & State \_\_\_\_\_ Date: \_\_\_\_\_

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