ST ANN'S RELIGIOUS EDUCATION/YOUTH MINISTRY PROGRAM 2024-2025 REGISTRATION FORM

| DATE: | 2024-2023 REGISTRATION FORM | |
|--|---|--|
| FAMILY NAME: | | |
| MAILING ADDRESS: | HOME PHO | ONE: |
| | REGISTERE | ED PARISHIONER? YES NO |
| PRIMARY EMAIL: | YEAR REGI | STERED: Circle one |
| St. Ann's RE/YM Office will communicate via email in most cases. Please desi | ignate a primary email address above to receive all notices via RE-Mail. | |
| MOTHER/LEGAL GUARDIAN: FULL NAME | MAIDEN NAME | |
| | ONOCCUPATION | |
| PLACE OF EMPLOYMENT BU | JS. PHONE MARITAL STATUS :MAR | RRIED SEPARATED |
| | IGLE CHILD(REN) LIVE WITH: BOTH PARENTS() FATHE | |
| Mother's Signature: | | |
| | | |
| | OCCUPATION | |
| PLACE OF EMPLOYMENTB | US. PHONE MARITAL STATUS: N | NARRIED SEPARATED |
| | NGLE CHILD(REN) LIVE WITH: BOTH PARENTS () FATHER | |
| Father's Signature: | | |
| EMERGENCY CONTACT PERSON: FULL NAME | RELATIONSHIP T | O CHILD |
| | OCCUPATION | |
| PLACE OF EMPLOYMENT: | | |
| | LLERGIES AND/OR DISABILITIES THAT MAY PERTAIN TO YO | OUR CHILD/CHILDREN: |
| | | |
| | | |
| Ves. Thereby grant permission for St. Ann REVM to request a con- | y of my child/children's Baptism certificate from St. Ann's Rectory (If child was baj | ntized at St. Ann Church) |
| (Please check.) | y or my charge march suspensive character from surviving streeter, (in child was su | Suzed de Su / Hill Charenji |
| SURVEY FOR PARENT SUPPORT | RE/YM REGISTRATION FEES | PAYMENT TOTAL |
| PLEASE CHECK AS MANY ITEMS BELOW WHICH | 1 ST CHILD: \$35.00, 2 ND CHILD: \$25.00, EACH ADDITIONAL CHILD: \$15.00 | REG. FEES |
| YOU CAN PARTICIPATE IN MAHALO! | YM T-SHIRT – REQUIRED: \$ 8.00 (6 TH - 8 TH GRADE STUDENTS) | YM T-SHIRT |
| SPECIAL EVENTS: | YM T-SHIRT-REQUIRED: \$10.00 (HIGH SCHOOL STUDENTS) | DONATION |
| Parent Workday Special Church events | PLEASE INDICATE YM SHIRT SIZE (Adult sizes only): S M L | |
| Retreat volunteer | XL OR XXL | TOTAL FEES |
| OFFICE/CLERICAL ASSISTANCE | FUNDRAISER SUPPORT: I WOULD LIKE TO HELP BY: | |
| OTHER | PLEASE INDICATE IF YOU WOULD LIKE TO HELP SUPPORT OUR RE/YM PROGRAM BY EITHER MAKING A \$25 DONATION PER CHILD OR SELLING A FUNDRAISER PRODUCT IN LIEU OF DONATION. | FOR OFFICE USE: CASH CHK# |
| ST. ANN CHURCH & SCHOOL RESERVES THE RIGHT TO USE STUDENT PICTURES IN PUBLICATIONS AND ON THE CHURCH WEBSITE. THE | Each child to participate in a Fundraiser Program to begin in September (more details to come.) | WAIVER (CA or FA) |
| 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 SEPTEMBER 22, 2024. | or by making a donation of \$25 per child | Please make checks payable to St. Ann Religious Education |

**No child will be refused registration because of cost. Please see cashier for details.

| My child has received 1st Reconciliation / Eucharist. Church City & State Date: | | | | |
|--|---|--------------------------|--|--|
| BAPTISM CONFIRMATION | CONFIRMATION 1ST RECONCILIATION / 1st EUCHARIST | | | |
| IF YOUR CHILD IS PREPARING TO RECEIVE ANY SACRAMENTS IN 2024-2025. PUT A CHECK NEXT TO THE APPROPRIATE SACRAMENT(S) BELOW: | | | | |
| , | | | | |
| CATHOLIC BAPTISM: HAS YOUR CHILD RECEIVED A CATHOLIC BAPTISM? YES NO IF NO, LIST RELIGION OF BAPTISM: | CHURCH OF BAPTISM | CITY & STATE | DATE OF BAPTISM | |
| | CHURCH OF RAPTISM | CITY & STATE | DATE OF BAPTISM | |
| *IF YES, PLEASE INDICATE PARISH YEAR(S) ENROLLED GRADE LEVEL(S) COMPLETED : | | FALL, 2024: | CLASS PLACEMENT: | |
| YES NO | CURRENT SCHOOL | GRADE IN THE | PARISH REG. VER: | |
| *IF NEW, PLEASE ANSWER THE FOLLOWING: -HAS YOUR CHILD RECEIVED ANY PREVIOUS RELIGIOUS EDUCATION? | | M / F circle one | BIRTH CERT. RCVD: BAPT. CERT. RCVD: | |
| STUDENT IS RETURNING (FROM 2023-24) NEW: | | SEX | YES NO (CIRCLE ONE) | |
| STUDENT LEGAL NAME: | <u>BIRTHDATE</u> | AGE | OFFICE USE: SACRAMENTS IN 2024-2025: | |
| My child has received 1st Reconciliation /Eucharist. Church | City & State | | Date: | |
| BAPTISM CONFIRMATION | 1ST RECONCILIATION / | | - | |
| IF YOUR CHILD IS PREPARING TO RECEIVE ANY SACRAMENTS IN 2024-2025. | PUT A CHECK NEXT TO THE | APPROPRIATE SACE | AMENT(S) RELOW: | |
| IF NO, LIST RELIGION OF BAPTISM: | | | | |
| CATHOLIC BAPTISM: HAS YOUR CHILD RECEIVED A CATHOLIC BAPTISM? YES NO | CHURCH OF BAPTISM | CITY & STATE | DATE OF BAPTISM | |
| YEAR(S) ENROLLED GRADE LEVEL(S) COMPLETED: | | | | |
| *IF YES, PLEASE INDICATE PARISH | CURRENT SCHOOL | GRADE IN THE FALL, 2024: | CLASS PLACEMENT: | |
| -HAS YOUR CHILD RECEIVED ANY PREVIOUS RELIGIOUS EDUCATION? YES NO | | circle one | BAPT. CERT. RCVD: PARISH REG. VER: | |
| *IF NEW, PLEASE ANSWER THE FOLLOWING: | | SEX M / F | BIRTH CERT. RCVD: | |
| STUDENT IS RETURNING (FROM 2023-24) NEW: | | CEV | YES NO (CIRCLE ONE) | |
| STUDENT LEGAL NAME: | BIRTHDATE | AGE | OFFICE USE: SACRAMENTS IN 2024-2025: | |
| my Gina has received in Neconchiduon/Eucharist, Charch | | - T | Date: | |
| BAPTISM CONFIRMATION My child has received 1 st Reconciliation /Eucharist. Church | | / 1st EUCHARIST | - | |
| IF YOUR CHILD IS PREPARING TO RECEIVE ANY SACRAMENTS IN 2024-2025. | PUT A CHECK NEXT TO THE | APPROPRIATE SACR | AMENT(S) BELOW: | |
| IF NO, LIST RELIGION OF BAPTISM: | | | | |
| CATHOLIC BAPTISM: HAS YOUR CHILD RECEIVED A CATHOLIC BAPTISM? YES NO | CHURCH OF BAPTISM | CITY & STATE | DATE OF BAPTISM | |
| YEAR(S) ENROLLED GRADE LEVEL(S) COMPLETED: | | FALL, 2024: | CLASS PLACEMENT: | |
| YES NO *IF YES, PLEASE INDICATE PARISH: | CURRENT SCHOOL | GRADE IN THE FALL, 2024: | PARISH REG. VER: | |
| -HAS YOUR CHILD RECEIVED ANY PREVIOUS RELIGIOUS EDUCATION? | | circle one | BIRTH CERT. RCVD: BAPT. CERT. RCVD: | |
| STUDENT IS RETURNING (FROM 2023-24) NEW: *IF NEW, PLEASE ANSWER THE FOLLOWING: | | SEX M / F | , , | |
| STUDENT LEGAL NAME: | | | SACRAMENTS IN 2024-2025: YES NO (CIRCLE ONE) | |
| | BIRTHDATE | AGE | OFFICE USE: | |