

**ST ANN'S RELIGIOUS EDUCATION/YOUTH MINISTRY PROGRAM**  
**2024-2025 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 RE/YM 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</p> <p>____ OFFICE/CLERICAL ASSISTANCE</p> <p>____ OTHER _____</p> <div><p>ST. ANN CHURCH &amp; SCHOOL 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 SEPTEMBER 22, 2024.</p></div>	<p>1<sup>ST</sup> CHILD: \$35.00, 2<sup>ND</sup> CHILD: \$ 25.00, EACH ADDITIONAL CHILD: \$15.00</p> <p>YM T-SHIRT – REQUIRED: \$ 8.00 (6<sup>TH</sup>- 8<sup>TH</sup> GRADE STUDENTS)</p> <p>YM T-SHIRT-REQUIRED: \$10.00 (HIGH SCHOOL STUDENTS)</p> <p>PLEASE INDICATE YM SHIRT SIZE (Adult sizes only): S M L XL OR XXL</p> <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 \$25 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 \$25 per child</p> <p><b>**No child will be refused registration because of cost. Please see cashier for details.</b></p>	<p>_____ REG. FEES</p> <p>_____ YM T-SHIRT</p> <p>_____ DONATION</p> <p>_____ TOTAL FEES</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>

