The Parish of the Holy Cross 95 Old Nichols Rd, Nesconset, NY 11767 (631) 265-2200

PLEASE	PRINT	CLEARLY
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FOR OFFICE USE ON	LY:	Level (s)	
Date:/	Amt:	Csh/Ck#	

Email: religioused@h	olycrossrc.org		LAGE FI	MINT CLEAKET			
REL	IGIOUS EDUCATION	RE-REGIS	TRAT	ION FORM 2023-2	24		DATE:/
Mailing Address: (ci	rcle one) Mr & Mrs, Mr, Mrs,	Ms		first name			
ddress:				first name		last name	
street Email address:		city	Mor	n Cell#		Dad Cell#	
		<u>PAR</u>	ENT /	GUARDIAN INFOR	MATIC	<u>DN</u> :	
	(first name) (mai	den name)	(las	t name) *Marita Status		Home Phone:	Work Phone:
Mother:							
Father:		****					
CHILDREN INFO	RMATION: List each c Registration Form, attaine (last name)	hild up to a ed from the I	nd inc	uding Level 8. <u>No N</u> Office or our website, r	ew Reg nust be	gistrants on this form	new to the program.
Please return cor RELIGIOUS ED FEI \$150 for one child \$230 for two or mo Catechists receive We accept Credit C	l agree in re children a 50% discount	<i>to pay:</i> (mus Full Now OR	st check		j the ye	which child and how mation will be kept	dren have an <u>IEP</u> ? If so, please indicate we can best meet their needs. All inforin confidence.

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RELIGIOUS EDUCATION REGISTRATION FORM 2021-2022

** Catechists Needed ** Please consider being a Catechist for our children. We provide training and support. If you are interested please give your name and the grade level you would like to teach. Name: ______ Levels:_____

Photo/Video Permission and Release Form 2023-2024

I hereby grant permission, without reservation, to **The Parish of the Holy Cross**, and to those authorized by **The Parish of the Holy Cross**, to take photographs and to make recordings of my child or children named below, and to use them in original or modified form in all media now or hereafter known, (including, without limitation, websites, bulletins, newsletters and promotional brochures) with or without name or information, solely for the promotion, public education, and /or fundraising activities of **The Parish of the Holy Cross**. I understand and agree that I am entitled to receive no compensation for the above.

I release **The Parish of the Holy Cross**, its officers, directors, agents, employees, independent contractors, licensees and assignees from all claims that I now have or in the future may have, relating to the above. I further agree that **The Parish of the Holy Cross** will be sole owner of all tangible and intangible rights in the abovementioned photographs and recording, with full power of disposition.

F 8	(-)	,	(-) -	
Name(s) of Child/Children:				
		-		
		-		
Parent Name:		Signature:		Date:
I decline permission:				

I am the parent or guardian of the minor (s) names below, and I hereby consent to the foregoing on behalf of the minor(s) and myself.

Photos may be reproduced in the Parish Bulletin. Photos will never be placed on the Internet. Please indicate you decline on this form if you do not wish your children to be in ANY photos.