

**ST ANN'S RELIGIOUS EDUCATION/YOUTH MINISTRY PROGRAM  
2020-2021 REGISTRATION FORM**

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

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

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

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

REGISTERED PARISHIONER? YES NO  
YEAR REGISTERED: \_\_\_\_\_ Select 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 (TASTE OF ST. ANN'S, CHRISTMAS FESTIVAL, SCHOLARSHIP DINNER &amp; DANCE, SILENT AUCTION)</p> <p>_____ OFFICE/CLERICAL ASSISTANCE</p> <p>_____ ST. ANN HO'OLAULEA</p> <p>_____ OTHER _____</p>	<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 (YOUTH SIZE ONLY):</p> <p>S      M      L      XL      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>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 27, 2020.</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 \$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 align="center"><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 align="center"><b>Please make checks payable to St. Ann Religious Education</b></p>

<b>STUDENT LEGAL NAME:</b> _____ STUDENT IS ... RETURNING (FROM 2019-20) _____ 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 2020-2021: YES NO (CIRCLE ONE)  BIRTH CERT. RCVD: _____ BAPT. CERT. RCVD: _____ PARISH REG. VER: _____  <b>CLASS PLACEMENT:</b>
	CURRENT SCHOOL	GRADE IN THE FALL, 2020:	
<b>CATHOLIC BAPTISM:</b> HAS YOUR CHILD RECEIVED A <b>CATHOLIC BAPTISM?</b> 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 2020-2021. PUT A CHECK NEXT TO THE APPROPRIATE SACRAMENT(S) BELOW:

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

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

<b>STUDENT LEGAL NAME:</b> _____ STUDENT IS ... RETURNING (FROM 2019-20) _____ 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 2020-2021: YES NO (CIRCLE ONE)  BIRTH CERT. RCVD: _____ BAPT. CERT. RCVD: _____ PARISH REG. VER: _____  <b>CLASS PLACEMENT:</b>
	CURRENT SCHOOL	GRADE IN THE FALL, 2020:	
<b>CATHOLIC BAPTISM:</b> HAS YOUR CHILD RECEIVED A <b>CATHOLIC BAPTISM?</b> 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 2020-2021. PUT A CHECK NEXT TO THE APPROPRIATE SACRAMENT(S) BELOW:

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

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

<b>STUDENT LEGAL NAME:</b> _____ STUDENT IS ... RETURNING (FROM 2019-20) _____ 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 2020-2021: YES NO (CIRCLE ONE)  BIRTH CERT. RCVD: _____ BAPT. CERT. RCVD: _____ PARISH REG. VER: _____  <b>CLASS PLACEMENT:</b>
	CURRENT SCHOOL	GRADE IN THE FALL, 2020:	
<b>CATHOLIC BAPTISM:</b> HAS YOUR CHILD RECEIVED A <b>CATHOLIC BAPTISM?</b> 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 2020-2021. PUT A CHECK NEXT TO THE APPROPRIATE SACRAMENT(S) BELOW:

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

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

