



Faith Formation Registration Kindergarten - 12th Grade

Student Information (Classes are filled on a first come first serve basis. Payment must be submitted to hold your spot.)

First & Last Name	M/F	DOB	Grade in 21-22	Sacraments (Please Check if completed/circle baptism location)	Class time for K-5 (select 1 st and 2 nd choice) Edge (6-8 grade/Wed @7) or LifeTeen (9-12 grade/Sun. @7)
				<input type="checkbox"/> Baptized @ POP St James <input type="checkbox"/> Other* <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmed	<input type="checkbox"/> Wed. @ 4:00 pm <input type="checkbox"/> Edge <input type="checkbox"/> Wed. @ 5:30 pm <input type="checkbox"/> LifeTeen
				<input type="checkbox"/> Baptized @ POP St James <input type="checkbox"/> Other* <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmed	<input type="checkbox"/> Wed. @ 4:00 pm <input type="checkbox"/> Edge <input type="checkbox"/> Wed. @ 5:30 pm <input type="checkbox"/> LifeTeen
				<input type="checkbox"/> Baptized @ POP St James <input type="checkbox"/> Other* <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmed	<input type="checkbox"/> Wed. @ 4:00 pm <input type="checkbox"/> Edge <input type="checkbox"/> Wed. @ 5:30 pm <input type="checkbox"/> LifeTeen
				<input type="checkbox"/> Baptized @ POP St James <input type="checkbox"/> Other* <input type="checkbox"/> 1 st Communion <input type="checkbox"/> Confirmed	<input type="checkbox"/> Wed. @ 4:00 pm <input type="checkbox"/> Edge <input type="checkbox"/> Wed. @ 5:30 pm <input type="checkbox"/> LifeTeen

***Please submit a baptismal certificate IF baptism was performed at a parish other than Prince of Peace or St. James. We will keep this on record for future use and hope to not have to ask for one again.**

Parent/Guardian Information

What Parish are you members of? _____

Mother's First & Last Name

Father's First & Last Name

Address

Address (if different)

Cell Phone _____

Cell Phone _____

Application and Registration Fee can be returned to the Prince of Peace Office

Registration Fees: \$45.00/student \$100.00 max/family

Scholarships are available.

Questions? Contact Amy Lowe or Stephen Friesell at 308.236.9171 or faithformation@kearneyprinceofpeace.org

OFFICE USE

Date submitted _____

Paid _____

Ck # _____ Cash _____

PDS Email Class

In case of emergency and parents cannot be reached please contact:

Name and relationship to child(ren)

Phone Number

Medical Information

List any allergies: _____

Any limitations or special information you feel beneficial for us to know?

Permission to use pictures for Publication/Website/Social Media

I, _____, give Prince of Peace Catholic Church, in Kearney, Nebraska, permission to take photographs/video of my child(ren):

(List each Child's name)

and to post in the church bulletin, classrooms, social hall, Prince of Peace Facebook page, parish app, West Nebraska Catholic, or other publications or media. I understand that this consent does not expire until my child has aged out of Faith Formation at Prince of Peace or quits the program. I understand my signature represents my consent.

Parent's signature

Date

Refusal to use pictures for Publication/Website/Social Media

I, _____, DO NOT give Prince of Peace Catholic Church in
Kearney, Nebraska permission to take photographs/video of my child(ren) OR to post them anywhere.

Parent's signature

Date

VOLUNTEER OPPORTUNITY

Our program only works because of volunteers who are willing to share their time and talents with us and our students. If you would be interested in hearing more about volunteering to our program, please indicate the area that you are interested in.

K-5th Catechist

Classroom Aide

Edge Leader

LifeTeen Leader

Name of adult interested

preferred way to be contacted (include # or address)

Do you have a middle school or high school aged child that would like to volunteer? List their name and contact below: