

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
Parent's First and Last name
Kearney, Nebraska permission to take photographs/video of my child(ren) OR to post them anywhere.

Parent's signature

Date

VOLUNTEER OPPORTUNITY

Our program's success depends on volunteers who are willing to share their time and talents with our students. If you would be interested in hearing more about volunteering to our program, please indicate the area that you are interested in. Thank you!

K-5th Catechist

Classroom Aide

Edge Leader

LifeTeen Leader

Name of adult interested

preferred way to be contacted (include # or address)