St. Peter Catholic Church

2022-2023 Religious Education Registration

Welcome Parent and Student Peterites to the new Religious Education school year! We look forward to your participation in our program.

FAMILY INFORMATION	Date:	
Family Last Name:	Home Phone:	
Father's Name:	Father Work/Cell:	
Mother's Name:		
Home Address:		
Mailing Address if different:		
Custodial Parent, if different from above	:	
E-Mail Address:		
We will use email to keep you informed o	of events. Please check the box if you do not use email.	
EMERGENCY CONTACT		
Emergency Contact Name:		
Emergency Contact Phone: ()_	Relationship to Child(ren):	
STUDENT INFORMATION		
Child's Name:	Birth Date:	
	of School:	
Notes for Teacher:		
CHILD 1 SACRAMENT INFORMATION – /	Please provide date & church where sacrament was received.	
	Church:	
CHILD 1 MEDICAL INFORMATION		
	Policy/Group Number:	
	Physician's Phone: ()	
Allergies:		
Other medical concerns:		
CHILD 2 INFORMATION - If only one chi	ld, please skip to the Medical Liability Release (Page 3).	
Child's Name:	Birth Date:	
Grade in 2022-2023: Name o	f School:	
	Please provide date & church where sacrament was received. hurch:	
	Church:	
	Church:	
Confirmation Date:		
Communication Date.	CHALCH.	

St. Peter Catholic Church

2022-2023 Religious Education Registration

CHILD 2 MEDICAL INFORMATI	ON			
Insurance Carrier:	Policy/Gr	oup Number:		
Student's Physician:	Policy/Gr Ph	ysician's Phone: ()		
Allergies:				
Other medical concern	ns:			
> If you are registering mo	re than two children, please pio	k up an additional forn	1.	
Parent Volunteer Opportuniti	es I v	vould like to volunteer as	s a catechist's aide	
I would like to volunteer as		e music skills and I would	l like to volunteer to	
I would like to volunteer as	a substitute teacher. help	with children's music for vould like to help with sp		
I would like to help with the	e Christmas Pageant.			
Vouth Musisians Vouss mus	iniana angiah aug Vouth Massas u	ith their received talent		
Youth Musicians – Young musicians enrich our Youth Masses with their musical talent. The youth musicians practice and participate in mass on a monthly basis. I am interested in the youth music ministry. Please contact me with complete information.				
Registration Fee				
The registration fee helps to cover book and class supply expenses. We accept cash or check. Registration fees for the 2022-2023 school year are listed below.				
	Family	\$45		
	 Need-based scholarships available 	able upon request.		
In an effort to simplify the snack routine for our families, we will once again provide the students with a light snack to enjoy in class on Sunday morning. Please consider making a Snack Donation to help defray the cost of snacks. The suggested donation is \$15 per child for the entire school year.				
Please submit completed forms and payment to the Church Office or to Rosalinda Hally, CRE. Please make check payable to St. Peter Church. You may mail completed forms and payment to St. Peter Church, 31300 Overseas Highway, Big Pine Key, FL 33043 Attention: Rosalinda Hally, CRE.				
For Office Use Only				
Reg. Fee Due:	Reg. Fee: Pd.:	Cash / Check #	Snack Donation:	

St. Peter Catholic Church

2022-2023 Religious Education Registration

MEDICAL LIABILITY RELEASE
I, the undersigned guardian of, do hereby release, forever discharge and agree to hold harmless St. Peter Catholic Church and the directors thereof from any and al liability, claims or demands for personal injury, sickness or death as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the student participant(s) that occur while the student(s) is/are involved in any trip or activity for which I have given him/her permission to attend.
Furthermore, I, on behalf of my child/children, do assume all risk of personal injury, sickness, death, damage and expenses as a result of participation in recreation and work activities involved therein.
Furthermore, authorization and permission is given to said church to furnish any necessary transportation, food and lodging for the aforementioned participant(s).
I do also authorize adult workers with St. Peter Catholic Church and its programs to consent to any examination, X-ray, anesthetic, medical, surgical diagnosis/treatment and hospital care which is deemed advisable by, and is rendered under the general or special supervision of any physician or surgeon licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician at such hospital. I assume the responsibility of all medical bills, if any.
The undersigned further agrees to hold harmless and indemnify said church, its directors, employees and adult workers for any liability sustained by said church as the result of the negligent, willful or intentional acts of said participant, including expenses incurred. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary actions or otherwise, I hereby assume all transportation costs.
Parent/Guardian Signature: Date:
MEDIA RELEASE
I, the undersigned guardian of
Parent/Guardian Signature: Date:
TEXT MESSAGING RELEASE
I, the undersigned guardian of, do understand that in high school youth ministries text messages may be used to communicate with students. Ultimately, I am responsible for my children's communications, but I understand that these tools are used for the means of effective communication
☐ I <u>DO NOT</u> want St. Peter Church Youth Ministry volunteers to communicate with my child via text messaging.

Parent/Guardian Signature: ______ Date: _____