

St. Charles Borromeo Catholic Community
2018-2019 Registration Form for Pre-School/TK, Faith Formation K-3, Middle School 4-6, Intergenerational Faith Communities
& Youth Ministry (Junior High School & High School)

Parents(s)/Guardian(s) Last Name _____ **Registration Date:** _____
(Please Print)

Parent/Guardian (with whom the child resides): **Important – Please provide EMAIL for program communication...**

Father: _____ Religion: _____ Bus. Phone: (____) _____ ext. _____ Marital Status: _____
 Mother: _____ Maiden Name: _____ Religion: _____ Bus. Phone: (____) _____ ext. _____ Cell Phone: (____) _____
 Address: _____ Zip: _____ Home Phone: (____) _____
Email Address: (REQUIRED) _____

Do you need two mailings? (write 2nd address here)

Name: _____ Relationship to child: _____ Religion: _____ Marital Status: _____
 Address: _____ Zip: _____ Home Phone: (____) _____
 Email Address: _____ Bus. Phone: (____) _____ ext. _____ Cell Phone: (____) _____

*** Please List ALL Children registering for programs***

Child's First Name & Last Name (if different)	M/F	Date of Birth (mm/dd/year)	School	Grade Sept 2018	Baptized	Baptized @ St. Charles	First Eucharist (Communion)	First Reconciliation (Confession)	Confirmation	Sacrament Code	Class Code
1.					Yes / No	Yes / No	Yes / No	Yes / No	Yes / No		
2.					Yes / No	Yes / No	Yes / No	Yes / No	Yes / No		
3.					Yes / No	Yes / No	Yes / No	Yes / No	Yes / No		
4.					Yes / No	Yes / No	Yes / No	Yes / No	Yes / No		

(office use only)

***If preparing for First Eucharist or Confirmation we will need copy of your child's baptismal certificate**

Are you registered with St. Charles? **Yes / No** **If no, please complete Parish Registration Form (available from coordinator)**

Has the student had previous Confirmation preparation? **Yes / No** When/Where? _____

Were you previously registered in the Faith Formation Program at St. Charles? **Yes / No** When? _____

If not, have the children attended a religious education program elsewhere? **Yes / No** Where? (Program Name and Location) _____

Mass Attendance: **Weekly or almost weekly:** _____ **Once or twice a month:** _____ **Several Times a Year:** _____ **Important Days Only:** _____ **Rarely or Never:** _____ **Homebound:** _____

For Office Use Only

Total Tuition Due _____ Tuition Pd. _____ Outstanding Balance _____ Check# _____ Cash _____ Credit Card _____
 Catechist Waiver _____ Cat. Class Code _____ Financial Aid Waiver _____

Payment is due at the time of registration. Please make checks payable to St. Charles Borromeo. Please indicate on check program fee designation.

CREDIT CARD CHARGE AVAILABLE

**Parish
 Registration
 Form available
 from
 coordinator.**

Diocese of Oakland

St. Charles Pre-School, Faith Formation & Youth Ministry 2018-2019

PARENTAL PERMISSION, HEALTH AUTHORIZATION, RELEASE FORM

Child's Name _____ Grade _____ Birth Date _____

Child #2 _____ Grade _____ Birth Date _____

Child #3 _____ Grade _____ Birth Date _____

Child #4 _____ Grade _____ Birth Date _____

Parent/Guardians Name _____ Home Phone _____

Address _____ Work Phone _____

(street, city, zip)

Father's Cell Phone _____ Mother's Cell Phone _____

IN CASE OF EMERGENCY, NOTIFY PERSON OTHER THAN PARENT/GUARDIAN:

Name _____ Phone _____

HEALTH AND MEDICAL INFORMATION

Family Physician _____ Phone _____

Address _____

Medical Plan _____ Plan Number _____

Do you authorize the adult leader to authorize medical treatment for your child in an emergency, as considered necessary by the attending physician? Yes ___ No ___

State any reasons why you do not want medical care given to your child in an emergency:

List all conditions (such as allergies, seizures) for which your child requires ongoing medication and state the type and frequency of medication given:

Has your child had difficulty with the following (check all that apply):

Asthma Fainting Spells Convulsions Diabetes Heart Eyes Ears

Nose Throat Lungs Digestion Menstrual Problems

Other _____

List any physical restriction or restriction for any activity on the basis of medical condition:

State the date of your child's last physical examination: _____

(COMPLETE BACK OF FORM)

Diocese of Oakland

St. Charles Faith Formation, Pre-School & Youth Ministry 2018-2019

Parental Permission and Acknowledgement of Conditions for Participation in Program

- 1. I/we, parent(s) or authorized guardian(s) of the child named above give permission for his/her participation in Confirmation, Faith Formation, Pre-School and/or Youth Ministry meetings and activities at St. Charles Catholic Community September 1, 2018 – May 20, 2019, and all related activities, including but not limited to transportation to and from this youth ministry's and/or Confirmation events sponsored by St. Charles Borromeo.
2. I/we agree to direct my/our child to cooperate and comply with reasonable directions and instructions from Youth Ministry staff or adult volunteer leaders.
3. I/we agree to be responsible for all medical expenses relating to injury of my/our child as a result of his/her participation in this event, whether or not caused by the negligence of parish, youth ministry program employees, agents or volunteers or other participants.
4. I/we understand that youth participating in youth ministry events risk injury to the body, psyche or property damage to themselves and others. Such injuries can be caused by other persons or accidentally or intentionally self-inflicted, faulty equipment or facilities, conditions of recreational facilities, vehicle accidents while in transport or through the activity itself.

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In consideration for being permitted to participate in the activities of the Faith Formation/ Youth Ministry program, use the equipment provided and to enter the premises or facilities of the Diocese of Oakland (Diocese) for any purpose including observation and participation in activities, the parent or guardian for him or herself and any successors in interest and on behalf of the minor child agrees:

- 1. To release, waive, discharge and promise not to sue the Diocese of Oakland, and its affiliated entities, its officers, directors, employees, agents and volunteers (hereafter referred to as "Releases") from all liability for any loss or damage, and any claim or demands there for on account of serious or mortal injury to the body, injury to psyche or property of the minor child, or undersigned parent or guardian, whether caused by negligence or other conduct by the Releases while the minor child, parent or guardian is participating in this event or in, upon or about the premises of the Diocese or any of its facilities or equipment.
2. To indemnify and hold harmless the Releases from any loss, liability, damage or cost it may incur due to the presence of the minor child, parent or guardian in, upon or about the premises of the Diocese, its facilities or equipment, or while participating in any Confirmation and or/youth ministry meetings and/or activities whether caused by the negligence of Releases or otherwise.
3. That the parent or guardian has read this Agreement, voluntarily signs the Agreement and that no oral representations, statements or inducements apart from the contents of this written Agreement have been made.

Model Release Statement



I hereby (circle one) GRANT/ DECLINE permission for my child(ren) named on this form to be photographed and/or videotaped during Youth Ministry & Faith Formation Activities and events; and for the resulting photographs and/or videotaped footage to be edited, if necessary, and be published and/or broadcast (newspaper, church bulletin, church/diocesan website, etc) for the purpose of promoting the activities of St. Charles Borromeo.

I have read this Agreement and understand everything written above.

Signature of Parent or Guardian

Date

Signature of Parent or Guardian

Date

Program Registration Fees 2018-2019

Pre-School / Tiny Treasures	\$ 50.00 per child
Faith Formation Grade K-3 Middle School	\$100.00 per child
Faith Formation Grade 4-6	\$100.00 per child
Intergenerational Faith Communities	\$150 per family
Jr High Youth Ministry Grade 7-8	\$100.00 per youth
High School Youth Ministry 9-12	\$100.00 per youth
For a family of 4 or more children (Faith Formation K-5, MSYM, HSYM)	\$300.00 per family

**After September 30, 2018
Fees increase to ...** **\$125.00 per child**

Sacraments:

First Reconciliation	\$50 per child
First Eucharist (2 year preparation)*	\$50 per child
CICT (see brochure) (Christian Initiation for Children & Teens)	\$75 per child
Confirmation (2 year preparation)*	\$100 per child

*** Sacrament fee charged only once**

Please do not hesitate to discuss cases of financial hardship with program coordinator. All such cases will be handled in a discreet and confidential manner.

St. Charles Borromeo Payment Sheet

Family Name _____

OFFICE USE ONLY

Pre-School	_____ x \$50.00	_____
Faith Formation K-3	_____ x \$100.00	_____
Middle School Faith Formation 4-6	_____ x \$100.00	_____

Intergenerational Faith Communities	_____ x \$150.00	_____
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Sacraments		
First Eucharist	_____ x \$50.00	_____
First Reconciliation	_____ x \$50.00	_____
RCIC/T	_____ x \$75.00	_____

Junior High YM (7-8)	_____ x \$100.00	_____
HSYM (9-12)	_____ x \$100.00	_____

Sacraments		
Confirmation	_____ x \$100.00	_____

Family of 4 or more children (Sacrament fee excluded)	_____ x \$300.00	_____
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Check: _____ Cash: _____ Credit Card (circle one) Visa / MasterCard _____	Total Due _____ Total Paid _____ Balance _____
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Payment Plans and scholarships are available!

Scholarship Assistance \$ _____
 Payment Plan \$ _____ / month/bi-weekly

Please select a program your child(ren)/family will be a part of for the 2018-2019 year of Faith Formation (K-6). Indicate a 1st (1) and 2nd (2) choice.

We choose: _____ FF Tuesday afternoon, 3:45 PM until 5:00 PM (for K-3 only)

We choose: _____ FF Wednesday afternoon, 3:30 PM until 4:45 PM (for K-3 only)

We choose: _____ FF Wednesday night, 7:00 PM until 8:15 PM (for 2-3 only)

**We choose: _____ Wednesday night, Middle School (for 4-6 only)
7:00 PM until 8:15 PM**

We choose: _____ Intergenerational Faith Communities

Called to Serve
Volunteer Opportunities, K-6 grade

(We require that a parent volunteer in at least one area below)

As a community of Faith, we need your assistance to help form the faith of all people in our parish. Each family is asked to volunteer for one thing, especially those families in the Sacrament program or seeking Scholarship assistance. Thank you!

_____ Office Volunteer:

- _____ I would love to help do office work, during Faith Formation time (as needed):
 - _____ Tuesday afternoon, _____ Wednesday afternoon, _____ Wednesday night
 - _____ Occasional (e.g., collating major mailings, making reminder phone call, special projects)
 - _____ Help with the newsletter

_____ Faith Formation Program

- _____ I would like to be a _____ catechist _____ co-catechist _____ class aide
 - _____ Tuesday afternoon, _____ Wednesday afternoon, _____ Wednesday night
- _____ I would like to help with Children's liturgy of the word on Sundays
- _____ I would be happy to coordinate snacks for classes
- _____ I would like to help at Mass with Hospitality (5pm, 730am, 930am, 1130am)
- _____ I would like to coordinate end of the year party
- _____ I would like to help out with May Mary Crowning – Final Gathering Party
- _____ I would like to help coordinate a faith formation service project for the year
- _____ I would like to help with chaperone my child(ren)'s off-site activities/retreat(s)
- _____ I would like to help with VBS 2019

_____ Sacrament Program – First Eucharist/First Reconciliation

- _____ Set up/clean up team
- _____ Hospitality team
- _____ Help out with the retreat
- _____ Liturgical environment team
- _____ Coordinate the pot luck for retreat

_____ Childcare volunteer:

- _____ During Sunday Mass:
 - _____ 9:30AM _____ 11:30AM
- _____ Special events/Sacrament program
- _____ Quarterly nursery cleaning (4 hours)
- _____ End of the Year cleaning classrooms

Name: _____ Phone # _____

Email address _____