**SAINT FRANCIS XAVIER 2022-2023 REGISTRATION FORM**

FAMILY LAST NAME:

IS YOUR FAMILY REGISTERED PARISHIONERS OF SAINT FRANCIS XAVIER PARISH? YES NO

ARE YOU WILLING TO DONATE YOUR TALENTS AND VOLUNTEER AS A TEACHER (This program depends on volunteers)? YES NO

FAMILY ADDRESS:

 STREET CITY STATE ZIP

FAMILY EMAIL: \*MUST HAVE AND EMAIL ON FILE, AS THIS IS THE PRIMARY FORM OF COMMUNICATION

|  |
| --- |
| ADULT #1FIRST NAME LAST NAMECELL PHONE: EMAIL: |
| ADULT#2FIRST NAME LAST NAMECELL PHONE: EMAIL: |

CHILDRENS INFORMATION (IF APPLICABLE):

|  |  |
| --- | --- |
| CHILD #1 | FIRST NAME: LAST NAMESEX: M OR F (CIRCLE ONE) DOB: / / GRADE ENTERING:(IF APPLICABLE) YOUTH’S EMAIL: YOUTH’S CELL # |
| CHILD #2 | FIRST NAME: LAST NAMESEX: M OR F (CIRCLE ONE) DOB: / / GRADE ENTERING:(IF APPLICABLE) YOUTH’S EMAIL: YOUTH’S CELL # |
| CHILD #3 | FIRST NAME: LAST NAMESEX: M OR F (CIRCLE ONE) DOB: / / GRADE ENTERING:(IF APPLICABLE) YOUTH’S EMAIL: YOUTH’S CELL # |
| CHILD #4 | FIRST NAME: LAST NAMESEX: M OR F (CIRCLE ONE) DOB: / / GRADE ENTERING:(IF APPLICABLE) YOUTH’S EMAIL: YOUTH’S CELL # |
| CHILD #5 | FIRST NAME: LAST NAMESEX: M OR F (CIRCLE ONE) DOB: / / GRADE ENTERING:(IF APPLICABLE) YOUTH’S EMAIL: YOUTH’S CELL # |
| CHILD #6 | FIRST NAME: LAST NAMESEX: M OR F (CIRCLE ONE) DOB: / / GRADE ENTERING:(IF APPLICABLE) YOUTH’S EMAIL: YOUTH’S CELL # |

STANDARD PHOTO RELEASE FORM FOR MINOR CHILDREN

I hereby authorize Saint Francis Xavier Parish to publish the photographs taken of me and/or the undersigned minor children, and our names, for use in Saint Francis Xavier Parish printed publications and website.

I release Saint Francis Xavier Parish from any expectation of confidentiality for the undersigned minor children and myself and attest that I am the parent or legal guardian of the children listed below and that I have the authority to authorize Saint Francis Xavier Parish to use their photographs and names.

I acknowledge that since participation in publications and websites produced by Saint Francis Xavier Parish is voluntary, neither the minor child nor I will receive financial compensation.

I further agree that participation in any publication and website produced by Saint Francis Xavier Parish confers no rights of ownership whatsoever. I release Saint Francis Xavier Parish, it’s officers, trustees, and it’s employees from liability for any claims by me or any third party in connection with my participation of the undersigned minor children.

 I do release I do not release

 Parent Signature

**REGISTRATION FEE SCHEDULE**

|  |  |  |
| --- | --- | --- |
| **DESCRIPTION** | **FEE** | ***CHECK HERE FOR PROGRAM*** |
| ***Non Sacramental Years****(All grades except grade 2+9)* | $40.00 (Per Child) |  |

|  |  |  |
| --- | --- | --- |
| **1st Penance AND 1st Communion Preparation*****Open to any child entering grade 2*** | $45.00(Per Child) |  |
| **Homeschool** (Any grade EXCEPT 2nd and 9th) | $40.00(Per Child) |  |
| **Confirmation Preparation** ***Open to any young person entering grade 9*** | $45.00 (Per Teen) |  |

|  |  |  |
| --- | --- | --- |
| **TOTAL COST** | **$ .00** |  |

Money is never a barrier to any Religious Education & Faith Formation programming.

If your family is facing financial hardship, please email or call the Religious Education Office at (401) 434-1878 or at stfrancisx21@gmail.com

\*\*\*\*\*Please make checks payable to: Saint Francis Xavier Church\*\*\*\*\*

Saint Francis Xavier Religious Education

**Child Pickup Form**

2022-2023

(Please do not fill this form out unless your children are in Grades K-5)

Date:\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Grade/Room#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The following people are authorized to pick-up my/our child from Religious Education class:

 **Parent/Guardian Phone Number**

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Name of Person Relationship to Child Phone Number**

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Parent/Guardian Date**

If you need to make changes to this list during the school year, **PLEASE** communicate the changes *in writing* to me in the Religious Education Office.