

## Faith Formation Program Registration Saint Luke's Catholic Church

Please complete both sides of this form, only **ONE** form per family is necessary.

**Faith Formation Program fee is \$25 per child for regular classes and \$55 per child for First Communion and Confirmation classes. Please make checks payable to ST. LUKE'S Faith Formation.**

*Please note: If you have any children beyond the 2nd grade who have not received First Communion please indicate next to the child's name and contact Lori Beckius in the Faith Formation Office. Additionally, if you have any children who have already been confirmed please indicate this next to the child's name.*

Childs name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Amt Due: \_\_\_\_\_

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Total Amount Due: \$ \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ (Cash / Check)

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Child's Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_ Mother's Cell Phone: \_\_\_\_\_

Father's Work Place and Phone: \_\_\_\_\_ Mother's Work Place and Phone: \_\_\_\_\_

If single parent household, please indicate custodial parent: \_\_\_\_\_

Preferred form of communication: Email: \_\_\_\_\_ Text: \_\_\_\_\_ Phone: \_\_\_\_\_

**\*\*Parent email addresses:** \_\_\_\_\_

**PLEASE NOTE: All information on this form is kept confidential, including your email address.**

**Emergency Contact Information (other than yourselves):**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**No Contact Individuals:**

Please list any individuals that are not allowed to have contact with your children and should not pick them up:

\_\_\_\_\_

**I have read and understand the Faith Formation Handbook and agree to abide by all policies therein.**

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

## Saint Luke's Catholic Church Likeness Release Form

I, \_\_\_\_\_, hereby grant St. Luke's Catholic Church permission to use my child/children's likeness in a visual image, including but not limited to: still photography, electronic and print publications, websites and Facebook. This likeness may be used without payment or any other consideration.

I hereby irrevocably authorize St. Luke's Catholic Church to edit, alter, copy, exhibit, publish or distribute my child/children's likeness for purposes of publicizing St. Luke's Church or School programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my child/children's likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the likeness.

I hereby hold harmless and release and forever discharge St. Luke's Catholic Church from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I hereby certify that I am the parent or legal guardian of the below named child/children and do hereby give my consent without reservation to the foregoing on behalf of my child/children. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

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

Printed Name: \_\_\_\_\_

Child/Children's names to be included in this waiver:

- |          |          |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |