

# Youth Catechetical Registration

## Parent / Guardian

The information listed below will be used to contact you.

	Last Name	First Name	Religion	Maiden Name
<b>Father</b>	_____	_____	_____	_____
<b>Mother</b>	_____	_____	_____	_____
email <sup>1</sup>	_____		<sup>2</sup>	_____
phone <sup>1</sup>	_____		<sup>2</sup>	_____
address	_____			

## Student(s)

**2022-23 School Year**

Grade	Last Name	First Name	School	Health Concerns
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## Permissions

Please sign below indicating your agreement to the following:

- DATA** The above information is accurate to the best of my knowledge.
- POLICIES** I have read and will abide by the the Youth Catechetical Programs policies.
- SAFETY** Every student will receive annual personal safety training appropriate for their grade unless a written objection is received from the parent or legal guardian.
- PHOTO** Student photographs & names will be used in the paper, on the internet or where appropriate unless a written objection is received from the parent or legal guardian.
- EMERGENCY** I authorize the responsible person at St. Cecilia's Family Life Center to transport my child to the nearest hospital emergency room in emergencies requiring immediate medical attention.

_____	_____
Parent / Guardian Signature	Date

## Fees

**Scholarships are available for those in financial need.**

_____	<b>PSR Fee</b>	\$45 - 1 child    \$80 - 2 children    \$ 100 - 3 or more children
_____	<b>Sacramental Class Fee</b>	\$15 - Reconciliation    \$30 - Confirmation & Eucharist    \$15 - Confirmation

<input style="width: 100%;" type="text"/>	<b>Please make checks payable to: St. Cecilia Church</b>
<b>total due</b>	

### for office use only:

\$ amt pd: \_\_\_\_\_    date pd: \_\_\_\_\_    init: \_\_\_\_\_    cash or check #: \_\_\_\_\_