

Our  
Lady  
of  
Grace

## 2023-2024 FAITH FORMATION / YOUTH MINISTRIES NEW FAMILY ENROLLMENT FORM

[Please PRINT clearly and complete all information on BOTH sides of this form]

Immaculate  
Conception



Saint  
Joseph's

FAMILY LAST NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

Street

City

Zip Code

BEST CONTACT PHONE: \_\_\_\_\_  Home  Cell

EMAIL ADDRESS \_\_\_\_\_

WHICH PARISH ARE YOU REGISTERED AT?

IC  OLG  SJ  None  Other \_\_\_\_\_

### FATHER'S INFORMATION

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

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Religion: \_\_\_\_\_

MARITAL STATUS: Married \_\_\_\_ Single \_\_\_\_ Divorced \_\_\_\_ Widowed \_\_\_\_

### MOTHER'S INFORMATION

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

Maiden Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Religion: \_\_\_\_\_

### EMERGENCY INFORMATION – Please list someone OTHER than a parent/guardian

We will also attempt to contact a parent first, but in the event of an emergency and we are unable to contact a parent/guardian, please contact the following:

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### FEES & CONSENT

**Tuition for 2023-2024 is \$70.00 for one child - \$130.00 for two - \$180.00 for three or more children.**

Please circle appropriate amount and indicate \_\_\_\_ Check or \_\_\_\_ Cash

**Please Note: Payment is due with registration. Thank you.**

**PERMISSION & RELEASE:** I grant permission for my child(ren) to participate in all activities scheduled by the Evangelization and Catechesis Team that are held on the grounds of our three parishes. I also consent to my child(ren) participating in online/virtual sessions as scheduled. *I specifically grant permission for my child(ren) to be photographed for display and use within the parishes on bulletin boards, in the weekly bulletins and on the parish websites and Facebook pages.*

**PARENT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Forms cannot be accepted without parent/guardian signature.**

### STUDENT(S) INFORMATION

CHILD'S NAME \_\_\_\_\_ GRADE IN 2023-2024 \_\_\_\_\_ SCHOOL DISTRICT \_\_\_\_\_

Male  Female    DATE OF BIRTH \_\_\_\_\_ CITY & STATE OF BIRTH \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Church where Baptized (incl City/State) \_\_\_\_\_

A copy of the child's baptismal certificate must be on file. Please include a copy if this is the first time you are enrolling.

Does this child have any allergies or medications we should be aware of?  Yes  No

If yes, please specify: \_\_\_\_\_

Please share anything you feel we should know about your child to help us make their FF/YM experience the best possible (special needs, IEP information, social/emotional needs, etc). This information will be kept in strict confidence and shared only with catechists as needed. \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_ GRADE IN 2023-2024 \_\_\_\_\_ SCHOOL DISTRICT \_\_\_\_\_

Male  Female    DATE OF BIRTH \_\_\_\_\_ CITY & STATE OF BIRTH \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Church where Baptized (incl City/State) \_\_\_\_\_

A copy of the child's baptismal certificate must be on file. Please include a copy if this is the first time you are enrolling.

Does this child have any allergies or medications we should be aware of?  Yes  No

If yes, please specify: \_\_\_\_\_

Please share anything you feel we should know about your child to help us make their FF/YM experience the best possible (special needs, IEP information, social/emotional needs, etc). This information will be kept in strict confidence and shared only with catechists as needed. \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_ GRADE IN 2023-2024 \_\_\_\_\_ SCHOOL DISTRICT \_\_\_\_\_

Male  Female    DATE OF BIRTH \_\_\_\_\_ CITY & STATE OF BIRTH \_\_\_\_\_

Date of Baptism: \_\_\_\_\_ Church where Baptized (incl City/State) \_\_\_\_\_

A copy of the child's baptismal certificate must be on file. Please include a copy if this is the first time you are enrolling.

Does this child have any allergies or medications we should be aware of?  Yes  No

If yes, please specify: \_\_\_\_\_

Please share anything you feel we should know about your child to help us make their FF/YM experience the best possible (special needs, IEP information, social/emotional needs, etc). This information will be kept in strict confidence and shared only with catechists as needed. \_\_\_\_\_

### PARENT INVOLVEMENT

We appreciate you sharing your time and talent with the children and teens in our parishes.  
Please indicate if you are interested in volunteering in any of the following areas:

\_\_\_\_\_ Catechist (Grade Level \_\_\_\_\_)    \_\_\_\_\_ Substitute catechist as needed  
\_\_\_\_\_ Children's Liturgy of the Word    \_\_\_\_\_ Office Volunteer    \_\_\_\_\_ YM Chaperone  
\_\_\_\_\_ Baking for various events – we will contact you via email as needed

For the safety of our children all volunteers who come in contact with youth are required to complete an application, a standard code of conduct, safe environment training and background checks.

For Office Use Only:

Date Rec'd: \_\_\_\_\_

Payment: \_\_\_\_\_

\_\_\_ Cash Or Check # \_\_\_\_\_

Bapt. Cert: \_\_\_\_\_

PDS Data Updated \_\_\_\_\_

Enrolled \_\_\_\_\_

Added to Session \_\_\_\_\_

PR Card Updated \_\_\_\_\_

Family Folder \_\_\_\_\_