

Immaculate Conception
Religious Education/Sacrament Preparation/Youth Ministry
2026-2027 Registration Form

Office Use:

Child/Teen Name	Date of Birth	Grade	Date and Place of Baptism
_____	____/____/____	_____	_____
_____	____/____/____	_____	_____
_____	____/____/____	_____	_____
_____	____/____/____	_____	_____

Mailing Address including city and Zip Code

CHILD(REN)/Teens(s) LIVES WITH (please check one): Both Parents ____ Mother ____ Father ____ Other: _____

Mother's Name _____ Phone # ____-____-____ Email _____

Father's Name _____ Phone # ____-____-____ Email _____

CHILDREN/TEEN PROGRAMS - Please indicate all programs you intend your child to be enrolled in for the 2026-2027 academic year

Child's Name	Family Based Religious Education (Grades 1-6)	First Reconciliation	First Eucharist	Middle School/ Confirmation Preparation (Grades 8 & 9)	High School Youth Group (Grades 9-12)

NOTE: If your child is planning on celebrating First Reconciliation, First Eucharist or Confirmation during this year, please provide Rich with a copy of your child's baptism certificate **IF** they were not baptized at St. Catherine's.

Religious Education/Sacrament Preparation/Youth Ministry
2026-2027 Registration Form
(continued)



MEDICAL AND/OR EDUCATIONAL NOTATION – Does your child have any medical conditions (including allergies) and/or special educational needs or learning disabilities that we should be aware of?

No ☐ Yes ☐ If yes, please specify below.

Comments: _____

Emergency Contact Name _____ Phone # _____ Relationship to child/teen _____

EMERGENCY CONTACT OTHER THAT PARENT (used only if parent cannot be reached)

NAME _____

CELL and/or HOME PHONE _____



DISMISSAL RELEASE INFORMATION - Other than parents, to whom may your child(ren) be released from Faith Formation classes?

Name	Phone	Relationship to child/teen
_____	_____	_____
_____	_____	_____

Is there anyone to whom your child(ren) should NOT be released? _____
Name and relationship to child(ren)



PARENT/GUARDIAN CONSENT FORM – PHOTO/VIDEO RELEASE

☐ I grant permission for my child to be photographed during 2026-2027 Faith Formation, sacrament preparation, youth group, liturgies, activities and events. I further agree that these photos (still and moving) may be used in a variety of contexts to spotlight Immaculate Conception Parish, including the parish and diocesan websites, parish bulletin boards, bulletins, newsletters, news releases for community newspapers, etc. (NOTE: No names will be used in conjunction with any photographs).

☐ I do not grant permission for my child to

Parent/Guardian Signature: _____ Date: _____