

St. John the Evangelist Fort Pierre, SD
RELIGIOUS EDUCATION REGISTRATION 2016-17

Registration Fee:

Please make checks payable to: **St. John the Evangelist**

Individual \$25.00 ~ Family \$75.00 (three or more) TOTAL _____

*Scholarships are available. Please contact parish office: 223-2176

Parent Information: _____

Mailing Address: _____ Zip: _____

E-Mail Address of Parent (s): _____

Phone Numbers: Home: _____ Work/Cell: _____

Emergency Contact Name: _____ Phone: _____

STUDENT INFORMATION:

Any student seeking sacramental preparation for First Communion\Reconciliation or Confirmation will also need to be enrolled in Faith Formation Classes. *All parents registered at St. John's and students enrolled in Faith Formation classes, are strongly encouraged to attend weekend mass here at St. John's*

1. M / F ___ Student Name: _____ Grade: _____

1st Communion: ___ (2nd grade or older) Date Baptized: _____ Church & address: _____

Confirmation: _____ (7-12) 1st Communion: _____ Church & address: _____

2. M / F ___ Student Name: _____ Grade: _____

1st Communion: ___ (2nd grade or older) Date Baptized: _____ Church & address: _____

Confirmation: _____ (7-12) 1st Communion: _____ Church & address: _____

3. M / F ___ Student Name: _____ Grade: _____

1st Communion: ___ (2nd grade or older) Date Baptized: _____ Church & address: _____

Confirmation: _____ (7-12) 1st Communion: _____ Church & address: _____

4. M / F ___ Student Name: _____ Grade: _____

1st Communion: ___ (2nd grade or older) Date Baptized: _____ Church & address: _____

Confirmation: _____ (7-12) 1st Communion: _____ Church & address: _____

If your child has any **ALLERGIES** or special needs we should be aware of, please indicate below.

Child's Name Allergies or Special Needs _____

Permission/Medical Release\To Photography

The above mentioned participants are permitted to participate in the activities planned at the St. John's Parish Faith Formation including any activities that the youth may need to be transported to outside the facilities for the year 2016-17, such as bingo, community service projects or movies, etc. I/We understand that reasonable precaution will be taken to safeguard the health and safety of the participant) and that the designated emergency contact person will be notified as soon as possible in case of emergency. In the event of any sickness or accident, person(s) will not hold St. John the Evangelist Church, the Diocese of Rapid City, any volunteer, chaperone, or driver responsible. I/We authorize and consent that emergency treatment be rendered under the general or specific supervision and on the advice of any physician, dentist, or surgeon; licensed to practice in the State of South Dakota or any other state. The undersigned understands and agrees that any medical, dental, or hospital expense incurred shall be at their own expense. The undersigned understands every effort will be made to notify the emergency contact in the event that treatment is necessary. Without compensation, I hereby grant permission to the Diocese of Rapid City & St. John The Evangelist Catholic Church, of Ft. Pierre, SD to use and reproduce photographs of me or my child. These photographs may be used for news and editorial purposes in publications, electronic reproductions (websites), and/or brochures. In addition, I grant my permission to alter the same photos without restriction and to copyright the same. I hereby release the photographer, the journalists, and the publications or media outlets they represent as well as the Diocese of Rapid City, from all claims and liability relating to said photographs.

Parent Signature: _____

Parish Faith Formation Youth Program

Number Attending

1st Grade:	Boys and Girls	_____
2nd Grade:	Boys and Girls	_____
3rd Grade:	Boys and Girls	_____
4th Grade:	Boys and Girls	_____
5th Grade	Boys and Girls	_____
6th Grade:	Boys and Girls	_____
Confirmation:	Boys and Girls 7-12 grade	_____
9th-12th Grade	Boys & Girls	_____

Code of Conduct

1. Students should *act with reverence and respect during Masses and prayer services*. Hats must be removed, and gum must be thrown away. No food or beverages will be allowed in the classroom or church.
2. Students are expected to *be respectful to their peers, leaders, and guest speakers*. This includes listening while others are speaking and participating when appropriate, avoiding negative comments.
3. The use of *drugs, tobacco, alcohol, fireworks, matches, cigarette lighters*, or items that endanger people, pets, or property is *strictly prohibited*.
4. Language and behavior should exemplify Christian values. *Profanity is strictly prohibited*.
5. Participants are expected *to respect the rights and property of others*.
6. *Clothing must be appropriate*. Short shorts, short skirts, tank tops, and excessively baggy pants are prohibited. Undergarments should not be visible. Reference to drugs, or to tobacco or alcohol products, are prohibited.
7. *Cell phones*, iPods, and other electronic devices that may be distracting during the class are *not allowed*. All phones and electronic devices will be handed over to the teachers until the class is over.

Failure to follow the above rules will result in the following consequences:

1st offense: Student will be warned. **2nd offense:** Student will be removed from the group and asked to talk to the Youth Minister and or Priest. **3rd offense:** Parent will be contacted.

I have read this ***Code of Conduct*** and understand it, and I will abide by the rules and regulations as outlined above. I will also abide by all rules established by the adult leaders. In the event that I choose not to conform to these rules, I understand that my parents/guardians will be notified of the infraction and consequences will be assigned.

Signature of Participant (Youth) _____ ***Date*** _____

Signature of Participant (Youth) _____ ***Date*** _____

Signature of Participant (Youth) _____ ***Date*** _____

Signature of Participant (Youth) _____ ***Date*** _____

Signature of Parent (Adult) _____ ***Date:*** _____