

VISIONS AND POPE'S ARMY

Youth Ministry/ Parish Faith Formation

Registration 2020-2021

(6th Grade through 8TH VISIONS ; 9TH THROUGH 12th POPE'S ARMY)

(Includes Sacrament prep when necessary)

St. Jude Church- 930 Ashland Terrace- Chattanooga, TN 37415

Participant Last Name _____

First Name _____ M/F

Email _____ Cell phone # _____

Installed APP Groupme yes/no

Mailing address: Street _____ Apt# _____

City _____ Zip _____

School attending next fall _____ Grade starting _____

Participant Date of Birth _____

Preferred method of communication with participant email, text, **groupme**, other

Sacraments Received: (please circle) **Baptism** **Reconciliation** **Holy Communion** **Confirmation**

(if other siblings please add on a separate sheet of paper.)

Father's Full Name _____ Father's

phone # _____ Father's email _____

Preferred method of communication: email, phone-call, text, groupme

Mother's Name _____

Maiden name _____ Mother's phone # _____

Mother's email _____

Youth Ministry communicates mainly via a free app called **Groupme** please download to your phone or advise us if you are not able to do this

Do you give permission for your child to be contacted via groupme or text messages for information in relation to Youth Ministry? If so please sign here

Emergency Contact, used if a parent can not be reached in an emergency. (emergency care will be secured)

Name _____ Relationship to Teen _____ Phone # _____

Please note any Health Concerns/Special Needs/ Allergies:

** I give permission for my child's picture to be taken as part of youth activities and may be used in parish or diocesan publications only.

I give permission for my child to participate in the Keeping Kids Safe Program mandated by our diocese and presented once a year within the religious education curriculum. More info and lesson plans can be found at www.dioknox.org

_____ Parent Signature

Having parent volunteers assist with the program is vital to it's success. Would you be willing to help us serve God's young people?

Provide Snacks _____ Chaperone events _____
(must be virtus trained)

Small group facilitator _____ Other _____
(must be virtus trained) (training for facilitating provided)

FEE PER CHILD-\$30.00. Family maximum of \$80. Make check out to St Jude Church. -----

----- Office Use:

Date _____ Amount Paid _____ Check # _____ Cash _____ Amount Due _____
(note If Parent volunteers there is no charge for their children enrolled in program)