

St. Pius V Catholic Church
410 W Colvill / PO Box 367
Cannon Falls, MN 55009
Website: www.stpiusvcf.org

Registration For St. Pius V Faith Formation Classes 2009/2010

<p>THE REGISTRATION FEE IS \$35 PER CHILD.</p> <p>Number of children registered: _____ Amount Paid _____</p> <p><input type="checkbox"/> I need financial assistance <input type="checkbox"/> Fee is Waived because: I am a Faith Formation Catechist or Liturgy of the Word Leader for 2009/2010</p>	<p>For Office Use</p> <p>Check #: _____</p> <p>Cash: _____</p> <p>Date: _____</p> <p>Initialed _____</p>
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Mother's Name: _____ Home Phone # _____

Address: _____ Work Phone # _____

E-mail address _____

Father's Name: _____ Home Phone # _____

Address: _____ Work Phone # _____

E-mail address _____

Are you members of this parish? Yes No (If not, please register at the parish office)

PERSON (OTHER THAN PARENT) TO CONTACT IN CASE OF EMERGENCY

In case of emergency, parents/guardians will always be contacted first so we require an adult other than yourself that we can contact if we cannot get in touch with you.

Name _____ Phone # _____

Parents: I give my permission for my child/children to take part in St. Pius V Faith Formation classes/activities. I/we understand that this permission will cover all activities that are incorporated into and are a part of the Faith Formation program/curriculum. (Examples, but not limited to: Life Line Masses, NET Ministry events, nursing home visits, service projects, Church Youth Fellowship (CYF), sports, off premise retreats, etc.) In consideration of the opportunity for my child/children to participate and fully recognizing that such an undertaking may involve an element of risk, I/we assume all risks and hazards incidental to such participation and do hereby release, indemnify and agree to hold harmless the Archdiocese of St. Paul and Minneapolis, St. Pius V Catholic Church, its agents, employees and officers, and the chaplains, leaders, organizers and sponsors, and persons transporting our child/children to and/or from these activities. If transportation is not provided by St. Pius V Catholic Church, then transportation to/from events are the responsibility of each family and St. Pius V Catholic Church assumes no responsibility. Neither the Archdiocese of St. Paul and Minneapolis, St. Pius V Catholic Church nor any of said persons shall be held financially responsible for any injury, illness or death incurred as a direct or indirect result of this activity.

- **MEDICAL INSURANCE PROVIDED BY THE PARISH OR THE ARCHDIOCESE IS LIMITED & IS IN EXCESS TO ANY OTHER VALID AND COLLECTIBLE INSURANCE.**
- **IN CASE OF INJURY OR ILLNESS YOUR OWN MEDICAL INSURANCE WOULD BE USED.**

In the event of any emergency and I cannot be contacted, I hereby authorize that emergency treatment be administered. I/we the undersigned, have read this release and understand all its terms and execute it voluntarily and with full knowledge of its significance.

SIGNATURE _____ **DATE** _____

(Parent/Guardian)

Please complete registration
for each child on back



