

Queen of Heaven Parish

2018 – 2019 High School Youth Ministry (Upper Room) & Confirmation Registration Form

☞ **PLEASE SUBMIT A SEPARATE SHEET WITH ANY ALLERGIES, MEDICAL CONDITIONS OR SPECIAL NEEDS WE SHOULD KNOW ABOUT** ☞

CHILD INFORMATION

Child's Last Name	First Name	Birth Date	Gender (M/F)	Baptized? (Y/N)	Please circle who child lives with	Grade Placement for 2018/2019 school year	Check if making Confirmation this school year (9 th Grade or older)
					<input type="radio"/> Mom <input type="radio"/> Dad <input type="radio"/> Both <input type="radio"/> Other		
					<input type="radio"/> Mom <input type="radio"/> Dad <input type="radio"/> Both <input type="radio"/> Other		
					<input type="radio"/> Mom <input type="radio"/> Dad <input type="radio"/> Both <input type="radio"/> Other		

FAMILY INFORMATION **MOTHER:** LAST NAME: _____ FIRST NAME: _____ PHONE: _____

EMAIL: _____

FATHER: LAST NAME: _____ FIRST NAME: _____ PHONE: _____

EMAIL: _____

Please complete the Table below:

MOTHER	FATHER	ADDITIONAL EMERGENCY CONTACTS
Street Address:	Street Address:	Name Phone
Zip Code:	Zip Code:	

→ In the event of an accident or serious medical illness requiring medical attention, staff will first attempt to contact the mother or father. Failing this, an attempt will be made to contact the additional emergency contacts. If deemed necessary 9-1-1 will be called.

PREFERRED HOSPITAL: CHILDREN'S OTHER: _____

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TUITION INFORMATION

Please check if the following applies: I am a regular, active volunteer with Upper Room (Tuition and Sacramental Fees waived for all enrolled children).

Fees*

*All fees are due at time of Registration - SACRAMENTAL FEES FOR THOSE MAKING CONFIRMATION ARE IN ADDITION TO THE REGISTRATION FEE
Make checks payable to QUEEN OF HEAVEN*

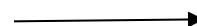
	# of Children	Early Registration Fee By June 1st	Fee After June 1st	Total (# of Children X Fee)
High School Youth Ministry (Upper Room)		\$35	\$45	\$
Confirmation		\$25	\$35	\$
Total:				\$

☞ IF PAYING ONLINE THROUGH YOUR BANK, PLEASE INCLUDE "UPPER ROOM OR CONFIRMATION REGISTRATION" IN THE "MEMO" OR "NOTE" SECTION OF THE CHECK

You may drop this Registration Form and payment off at the masses in the collection baskets, to the parish office,

or mail to: *Queen of Heaven, 1800 Steese Rd, Uniontown, OH, 44685*, **ATTN: Steven Dyer**

Signature of Parent/Guardian: _____ Date: _____



Queen of Heaven Parish

*Parental Transportation Waiver for 2018-2019:
for Parish-Related Activities off Queen of Heaven Church Grounds*

I give permission for my child, _____, to be transported to all parish trips/activities that require adult volunteers to drive off Queen of Heaven Grounds during the 2018-2019 school year.

In consideration of my child being permitted to be driven to the off-site parish-sponsored activity, on behalf of my dependent, my spouse, and myself, I hereby assume all risks in connection with transportation of my child to and from all events during the 2018-2019 school year and I further release, discharge, and/or otherwise indemnify the Diocese of Cleveland, the Bishop of the Roman Catholic Diocese of Cleveland, Queen of Heaven Parish and its employees and volunteers from all claims, judgments, liability by or on behalf of my dependent, myself, and my spouse for any injury or damage due to the youth being transported to the off-site activity including all risks connected therewith whether foreseen or unforeseen. Further, I acknowledge that it is my responsibility to provide adequate health insurance for my dependent child/youth.

I fully understand what is involved in this transportation waiver and I understand that I have the opportunity to call the parish staff persons to ask questions that I may have about this.

Parent/Guardian signature

Date

Photo Release and Authorization:

I (We) the parent(s) and or guardian(s) of the children listed on this form do hereby consent and authorize the use of any and all photographs taken during Upper Room events to be used for any publications such as the Upper Room Facebook page, the bulletin, newsletters, and other internal audience usages.

I **DO** consent: _____ Date: _____

Parent and/or Guardian Signature

I **DO NOT** consent: _____ Date: _____

Parent and/or Guardian Signature

Thank You !