

(Family Name _____)

PHOTO/MEDIA RELEASE

I understand that my consent grants Crucifixion Parish the right to use, reproduce, and/or distribute photographs, videotapes, and sound recordings of my son or daughter for use in materials they may create. (Parish web site, parish bulletin, parish Facebook page, etc.)

() I give consent to have my child/ren's photo/media released.

() I do NOT give consent to have my child/ren's photo/media released.

Parent signature _____ Date _____

VOLUNTEER OPPORTUNITIES

We depend on volunteers to make this Faith Formation program successful. Please consider helping us this year!!

I would like to assist with the program by:

_____ being on a catechetical team _____ grade

_____ helping with special projects as needed

_____ baking for special occasions

_____ I will volunteer as needed as a substitute catechist.

PARISH INFORMATION

Are you currently registered at Crucifixion Parish? _____ Yes _____ No

If not, would you like to register at this time? _____ Yes, please enroll my family.

_____ No, we wish to remain members of

_____ Parish.

REGISTRATION FEE

\$130 per child (Not to exceed \$260 per family.)

To be paid at time of Registration.

If you cannot pay in full at this time, or would like to pay with Scrip, please indicate below.

_____ Intend to make half payment now and half payment in March.

_____ Intend to use Scrip credits and will pay remaining balance in March.