

St. Gregory the Great Catholic Church

Faith Formation Registration Form 2024-2025

**REGISTRATION
DUE
AUGUST 15**

P. O. Box 609 • North Branch, MN 55056 • www.stgregorynb.org

St. Gregory Education Office: 651.674.7382 • Email: education@stgregorynb.org

Family Last Name _____ Home Phone Number: (____) _____

Street Address _____ City, Zip Code _____

Head of Household Name _____ Cell Phone #: _____ Work # _____

Email: _____

Spouse's Name _____ Cell Phone #: _____ Work # _____

Registered in St. Gregory the Great Parish: **Yes** **No** Opt in for Parish Notifications (Flocknote): **Yes** **No**

My child(ren) live with (Please circle): Both Parents Mother Father Joint Custody Guardian

STUDENT REGISTRATION: If registering more than 3 children, please use additional form.

<p>Sunday Faith Formation Age 3 - Kindergarten Sunday after Mass twice per month 11:30 a.m. - 12:30 p.m.</p>	<p>Kids In Christ (KIC) Grades 1-8 Wednesday Evening 6:00 p.m. - 7:30 p.m.</p>	<p>Disciples of Christ (DOC) Grades 9 & 10 Sunday Evening, twice per month 5:30 p.m. - 7:30 p.m.</p>
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All Classes are held at St. Gregory the Great Church

Parents of children preparing for the Sacrament of First Communion are expected to be involved in formation by attending monthly classes or a parish small group. Other parents are encouraged to attend also.

	Child #1	Child #2	Child #3
Legal First Name			
Middle Name			
Legal Last Name, if different			
Grade Level in Fall, 2024			
Last Grade of Faith Formation			
Gender	Male or Female	Male or Female	Male or Female
Date of Birth: MM/DD/YY			
Baptismal Date: MM/DD/YY			
Baptismal Church City, State			
Received First Reconciliation?	Yes or No	Yes or No	Yes or No
Received First Eucharist?	Yes or No	Yes or No	Yes or No
Where? Church, City, State			
Confirmed?	Yes or No	Yes or No	Yes or No
If child was enrolled in program elsewhere, indicate parish/city			

(OVER)



MEDICAL & SPECIAL NEEDS INFORMATION Is there any information that you would like us to know about your child(ren)? Any physical, emotional, family, or learning difficulties? Are there any specific health or medical issues we should be aware of? (All information will be treated with confidentiality.)

IN THE EVENT OF A MEDICAL/DENTAL EMERGENCY & I CAN NOT BE REACHED, I AUTHORIZE EMERGENCY TREATMENT TO BE ADMINISTERED TO ANY CHILD(REN) LISTED ON THIS FORM.

PRINT FULL PARENT/GUARDIAN NAME _____

SIGNATURE OF PARENT/GUARDIAN _____ DATE _____

IN CASE OF EMERGENCY, WHOM SHOULD WE CONTACT, OTHER THAN PARENT(S)? In the event that we are unable to reach parents during or immediately following class, please indicate an alternate contact person who will pick up your child(ren).

NAME _____ RELATIONSHIP TO CHILD _____

HOME # (____) _____ CELL #: (____) _____

AUTHORIZATION, CONSENT AND RELEASE FOR USE OF VISUAL LIKENESSES AND ORIGINAL WORKS OF MINORS

This form is in regards to parent/guardian permission for your child to be photographed or videotaped at St. Gregory the Great parish. Photos and/or names may be published in the parish bulletin, website, or on bulletin boards. Generally, we do not publish last names with photos. The photos/video may be used for information, education or sacramental purposes, regarding the programs or curriculum at St. Gregory the Great parish. The signed form is valid for one year.

Please complete form (attached) and return with Registration form.

FAITH FORMATION FEES INFORMATION: *Please read completely and fill in worksheet for cost.*

NUMBER OF STUDENTS ENROLLED:	
Ages 3, 4, Pre K & K (number of students) _____	X \$80.00 = \$ _____
GRADES 1 - 8 (number of students) _____	X \$90.00 = \$ _____
GRADES 9 & 10 (number of students) _____	X \$100.00 = \$ _____
	<i>(excludes retreat fees)</i>
	Total Fee = \$ _____
	Family Max is \$220.00 = \$ _____
	CATECHIST CREDIT: If teaching a class, deduct \$50.00 from total fees = \$ _____
	TOTAL DUE after Catechist discount = \$ _____
Make All checks payable to: St. Gregory the Great	

PAYMENT OPTIONS (Please check one): ALL FEES ARE DUE IN FULL WITH REGISTRATION UNLESS SPECIAL ARRANGEMENTS HAVE BEEN MADE.

- I have included full payment with registration Special payment arrangements, please call 651.674.7382

Parish Office Use Only: Program Fee: _____ Amount Paid: _____ Date: _____

Circle: Cash or Check # _____ Received by: _____



**St. Gregory the Great Catholic Church
SHARED MINISTRY OPPORTUNITIES**

*Discipleship as a way of life involves giving
of your time and talent to your church.
Come and share your talents with us.*



NAME: _____

HOME #: _____ CELL #: _____ WORK #: _____

**Please circle the volunteer position(s) you are interested in and time where applicable.
You will be called to confirm your choices.**

AREAS OF MINISTRY <small>Please circle areas of interest</small>	DESCRIPTION	TIME YOU ARE NEEDED
Catechist	Prepare lessons using materials provided. Teach classes following schedule.	<i>Please circle:</i> Sunday Faith Formation 11:30 am Wednesdays (KIC) 5:30 pm Sunday (DOC) 5:00 pm
Substitute catechist	Prepare and teach classes occasionally when needed	<i>Please circle:</i> Sunday Faith Formation 11:30 am Wednesdays (KIC) 5:30 pm Sunday (DOC) 5:00 pm
Classroom aid	Be present in classroom; assist with errands, attendance, discipline, etc.	Wednesdays 6:00 pm
First Communion hostess	Assist families at Mass during First Communions	Weekend Mass(es) during the Easter season

Continue on back

AREAS OF MINISTRY <small>Please circle areas of interest</small>	DESCRIPTION	TIME YOU ARE NEEDED
Parking Lot Monitor	Monitor the parking lot at dismissal time	Wednesday evenings 7:30 pm
Sponsor/Mentor (Confirmation)	Meet with Confirmation candidate to share faith, attend sponsor workshop with candidate and attend Confirmation ceremony	Two year period Workshop in January
Confirmation Retreat	<i>Circle area of interest:</i> Adult team, Prayer team, Speaker, Chaperone	To be Determined
Vacation Bible School	<i>Circle area of interest:</i> Guide, Crafts, Game/Activity Coordinator, Floater, Photographer, Decorator, Cook, Meal Servers	To be Determined Each Summer
Youth Ministry	Chaperone	As needed for event

Safe Environment Policy and Requirements from the Archdiocese of St. Paul & Minneapolis:

The following requirements ***must be completed prior to*** volunteer duties with minors!

Volunteers ages 18 years and older who have contact with children and youth are required to complete the Essential 3 (E3) requirements: Background Check, Code of Conduct, and Safe Environment Training that includes: VIRTUS training and Reporting Suspected Child Abuse training. These requirements and registration for VIRTUS training is done online at www.virtus.org. Please contact the Faith Formation office for information.

Volunteers younger than 18 years old will submit two reference checks written from trustworthy adults attesting to their character, lack of misconduct, and dependability for the volunteer position considered and sign a Youth Code of Conduct. A written statement from their current principal or teacher should also be obtained. Forms are available in the Faith Formation Office.



**AUTHORIZATION, CONSENT AND RELEASE FOR USE OF
VISUAL LIKENESSES AND ORIGINAL WORKS OF MINORS**

This form allows you, the parent or guardian, to identify if images of your child and their original works may be used for purposes of print, online, social media communication and promotion.

I am the parent or legal guardian of _____ (full name of minor) ("My Child").

I grant the following rights to St. Gregory the Great Church and the Archdiocese of Saint Paul and Minneapolis:

- 1) The right to use all photographs, pictures, portraits, vocal sounds, appearances/likenesses, video and performances (hereinafter collectively known as "image") of My Child in the possession of St. Gregory the Great Church;
- 2) The right to use, reproduce, publish, exhibit, distribute, and transmit the image of My Child individually or in conjunction with other images or printed matter in the production of brochures, slides, motion pictures, broadcasts (radio, television, and other social and digital media), audio or video files, recordings, still photography, CD-Rom and any other manner of media now known or later developed;
- 3) The right to use, reproduce, publish, exhibit, distribute, and transmit the image of My Child individually or in conjunction with other images or printed matter on St. Gregory the Great Church and the Archdiocese of Saint Paul and Minneapolis's Internet websites. **No home address or phone number will be published;**
- 4) The right to record, reproduce, amplify, edit, and simulate My Child's image and all sound effects produced;
- 5) The right to copyright, in the name of St. Gregory the Great Church and the Archdiocese of Saint Paul and Minneapolis, works that contain the image of My Child;
- 6) The right to use and publish for general communications, advertising, commercial or publicity purposes, or for any other lawful purpose whatsoever My Child's original work; and
- 7) The right to assign the above-mentioned rights to third parties without notice to me.

I understand that the video files, still photos, or other media incorporating the image of My Child will become the property of St. Gregory the Great Church. I hereby waive the right to inspect or approve the image or any finished materials that incorporate the image.

I understand and agree that no compensation will be provided, now or in the future, in connection with the use of My Child's image or My Child's original work.

I hereby release, discharge, and agree to indemnify and hold harmless St. Gregory the Great Church, the Archdiocese of Saint Paul and Minneapolis, and their agents, employees and assigns from any and all claims, demands, right, and causes of action of whatever kind that I or My Child have or may have or may arise by reason of this authorization and from the use of My Child's image and original work, including but not limited to, all claims for libel and invasion of privacy.

This consent regarding My Child's likeness and original work is valid until such time as I choose to rescind this authorization and consent. If I choose to rescind this authorization and consent, I agree that I will inform St. Gregory the Great Church in writing and that my rescission will not take effect until it is received by St. Gregory the Great Church. I understand and acknowledge that it may not be possible to recall any work or photos that have been published prior to receipt of my written rescission.

I hereby authorize and consent that St. Gregory the Great Church and the Archdiocese of Saint Paul and Minneapolis have the right to use My Child's name in connection with their educational, promotional, fund-raising activities, or for any other legitimate purpose.

Please initial: _____ Yes _____ No

I have read the above Disclosures, Authorizations, and Releases, have had the opportunity to consider their terms, and understand them. I execute this document voluntarily and with full knowledge of its significance.

Parent/Guardian Name (please print): _____

Address: _____

Phone number: _____

Signature of Parent/Guardian: _____ Date: _____