VISIONS AND POPE'S ARMY

Youth Ministry/Parish Faith Formation

Registration 2018-2019

(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 Info								
Last Name:								
First Name:			_					
Male	Female							
Date of Birth:								
Email:			Cell Phone #:					
Have GroupMe App	o Installed?	Yes	No					
Preferred method	of communicat	ion: Email	Text	Gr	oupMe			
Other:								
School attending n	ext fall:							
Grade starting:								
Sacraments Receive	ed: Baptism	Reconcilia	ation H	loly Cor	mmunion	Confirmation		
Mailing Address								
Street Address:			Apt #	‡ :				
City:	Zip	o:						
Parent/Guardian II	nformation							
Father's Full Name	:							
Father's Phone # _			_ Father's E	Email: _				
Preferred method of communication: Email			Phone	Call	Text	GroupMe		
Other:								
Mother's Full Name	· ·							

Maiden Name:	Mother's Phor	าе #	
Mother's Email:			
Preferred method of communication: Email	Phone Call	Text	GroupMe
Other:			
Youth Ministry communicates mainly via a fr would like to be included in this main form o	• •		ease indicate if you No
Do you give permission for your child to be conformation in relation to Youth Ministry? If		-	=
Emergency Contact (used if a parent cannot be secured)	be reached in ar	n emergen	cy; emergency care will
Full Name: Relati	onship to Teen:		
Phone #:			
Please note any Health Concerns/Special Ne	eds/Allergies:		
** I give permission for my child's picture to used in parish or diocesan publications only.		of youth a	activities and may be
**I give permission for my child to participat our diocese and presented once a year withi and lesson plans can be found at www.diokn	n the religious e	ducation c	urriculum. More info
Parent Signature:			
Having parent volunteers assist with the proto help us serve God's young people by chec	_		•
Provide Snacks Chaperone Events (Must Small Group Facilitator (Must be Virtus Train Other:	ed; Training for	Facilitating	•
Fee per child: \$30.00. Family maximum of \$3	80. Make check	out to St J	ude Church.
Date: Amount Paid:	Check #:	(Cash:
Amount Due:	for the sire abilation	- الحسم مم	d in programs
(Note: If parent volunteers, there is no charg	e for their childr	en enrolle	a in program)