



# St. Henry Parish CCD and Youth Ministry Programs

Registration  
School Year: 2026-2027

Please list the full name and grade level for each student (even first time kindergarten student) that will be attending the St. Henry Parish CCD Program. Thank you!

Indicate the program that each child will be attending: **SH Day** (K-10) **SH Eve** (11-12) **SB Wed. Eve** (K-12)

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_ Gender: \_\_\_\_ Program: \_\_\_\_\_

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Student's Name: \_\_\_\_\_ Grade: \_\_\_\_ Gender: \_\_\_\_ Program: \_\_\_\_\_

Father's Name: (first & last) \_\_\_\_\_

Mother's Name: (first & last) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Parish: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Secondary Email: \_\_\_\_\_

Mother Cell Phone: \_\_\_\_\_ Text: Y / N /  GroupMe

Father Cell Phone: \_\_\_\_\_ Text: Y / N /  GroupMe

### I am interested in volunteering for:

- Teacher
- Substitute
- Classroom Aide
- Decorating
- Providing Treats

Please specify if any of your children have special needs for the classroom so we may best educate them:

### Please initial the following boxes to acknowledge:

- The CCD program expects **respect of others and self**. After two or more infractions, I will meet with staff to resolve my child's behavior problems. My child will not be able to participate until after the meeting. Please indicate above if there are special considerations that might affect your child's behavior. This will allow us to form a plan for the child and staff to work together successfully.
- Participation in the CCD program assumes that I want my child(ren) to learn and live the Catholic faith.
  - By virtue of my baptism and the baptism of my child, I acknowledge that I am responsible to **ensure my child goes to Mass every Sunday** and frequent Reconciliation.
  - I will help my child to live the lessons taught in class and memorize their prayers.

By my signature, I authorize the St. Henry Parish to enroll my son/daughter into the release time program or Wednesday evenings and give my child(ren) permission to participate in the Youth Ministry program. I understand the importance of my child's religious education and will help to instill the values taught within the program.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

