**Santiam Vicariate Youth Ministry**

**Registration Form**

1077 N Sixth Ave., Stayton, OR 97383

**Cost is $30 per youth or $75 with 3 or more kids in grades 6th to 12th.**

 **Adults who volunteer & their youth are free and all youth leaders are free.**

**2nd year Confirmation candidates must bring a copy of their baptismal certificate to register.**

**Participant Information**

First Name: Last Name:

Youth Phone: Ok to Text: Yes/No Date of Birth:

Youth email: Age: Gender: Male Female

Mailing Address: City, State, ZIP:

Middle or High School Attending: Grade:

Sacraments Received (circle all that apply): Baptism Reconciliation Eucharist Confirmation

Date of Baptism *(leave blank if unsure)*:

\*Name of Church where candidate was Baptized: City, ST:

**Parent/Guardian Information**

First Name: Last Name:

Phone1: Text: Yes/No Phone2: Text: Yes/No

Email1: Email2:

Address: City, State, ZIP:

Parish household is registered in  **** Immaculate Conception-Stayton  Our Lady of Lourdes-Jordan

 St. Boniface- Sublimity  St. Mary- Shaw  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents speak  English  Spanish  Both Willing to bring snacks for YG Yes  No 

**Permission and Liability Waiver:**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, grant permission for my son/daughter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to participate in Santiam Vicariate Catholic Youth Ministry. I understand this activity will take place under the guidance and direction of employees and/or volunteers from the Santiam Vicariate Catholic Youth Ministry.

I, also consent to the use of any videotapes, photographic, slides, audio-tapes, or any other visual or audio reproduction in which my son/daughter may appear. I understand that these materials are being used for promotion of the youth ministry of Santiam Vicariate Youth Ministry Life Teen. Such promotional activities extend to recruitment, fund-raising, advocacy, etc.

As parent/legal guardian, I remain legally responsible for any personal actions taken by my son/daughter named above. I agree on behalf of myself, my son/daughter named herein, our heirs, successors, and assigns to hold harmless and defends Santiam Vicariate Catholic Youth Ministry, it’s officers, directors, agents and the Archdiocese of Portland from any liability for illness, injury or death arising from or in connection with my son’s/daughter’s attending Life Teen, I release the staff, volunteers, etc. from any liability connected with the use of picture or voice recording as part of any of the above similar activities, and I agree to compensate the parish, it’s officers, directors and agents, the Archdiocese of Portland, or representatives associated with the event for reasonable attorney’s fees and expenses arising in connection therewith.

Parent/Guardian Signature: Date: