



ST. NORBERT YOUTH CONFIRMATION & YOUTH MINISTRY REGISTRATION FORM
2024 -2025

FAMILY INFORMATION

Registered at St. Norbert Church? ☐ Yes ☐ No If no, name of church:

Primary Mailing Address:

Father's Information:

First: MI: Last:

Cell: Work:

Email:

Mother's Information:

First: MI: Last:

Last (Maiden Name):

Cell: Work:

Email:

Household Description (please select one): ☐ Both parents ☐ Single parent ☐ Legal guardianship

TEEN INFORMATION

Teen 1

☐ Confirmation 1 ☐ Confirmation 2 ☐ Edge

First: MI: Last:

Date of birth: Gender: ☐ Male ☐ Female

Cell: Email:

School: Grade in 2024-2025: ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th ☐ 11th ☐ 12th

Baptized: ☐ Yes ☐ No Church:
If yes, date received:

First Eucharist: ☐ Yes ☐ No Church:
If yes, date received: City & State:

Teen 2

☐ Confirmation 1 ☐ Confirmation 2 ☐ Edge

First: MI: Last:

Date of birth: Gender: ☐ Male ☐ Female

Cell: Email:

School: Grade in 2024-2025: ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th ☐ 11th ☐ 12th

Baptized: ☐ Yes ☐ No Church:
If yes, date received: City & State:

First Eucharist: ☐ Yes ☐ No Church:
If yes, date received: City & State:

Teen 3

☐ Confirmation 1 ☐ Confirmation 2 ☐ Edge

First: MI: Last:

Date of birth: Gender: ☐ Male ☐ Female

Cell: Email:

School: Grade in 2024-2025: ☐ 6th ☐ 7th ☐ 8th ☐ 9th ☐ 10th ☐ 11th ☐ 12th

Baptized: ☐ Yes ☐ No Church:
If yes, date received: City & State:

First Eucharist: ☐ Yes ☐ No Church:
If yes, date received: City & State:

Completed Registration Form and certificates (if applicable) are due by **Monday, August 5, 2024.**

Late Registration Fee will apply after August 5.

Please submit copies of Baptismal and 1st Communion certificates upon registration. Registration requires these certificates, and a late fee applies if submitted after August 5. If sacraments were received at St. Norbert Catholic Church (Orange, CA), no certificates are needed. Incoming Confirmation 2 teens do not need to resubmit certificates.

REGISTRATION FEES

| | Quantity | Subtotal: |
|--|---|--------------|
| EDGE PROGRAM (6th thru 8th Grade) Twice a month on Tuesdays from 6:30 to 7:45 pm | <input type="checkbox"/> | \$160.00 |
| CONFIRMATION 1 | | |
| Confirmation 1 Registration Wednesdays from 7 to 8:30 pm | <input type="checkbox"/> | \$160.00 |
| Confirmation 1 Retreat November 9, 2024 from 10 am to 6 pm | <input type="checkbox"/> | \$100.00 |
| CONFIRMATION 2 | | |
| Confirmation 2 Registration Wednesdays from 7 to 8:30 pm | <input type="checkbox"/> | \$160.00 |
| Confirmation 2 Retreat January 31 – February 2, 2025 | <input type="checkbox"/> | \$250.00 |
| T-Shirt Size (Adult Size) | <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL | |
| SPONSOR A TEEN | | |
| Edge or Confirmation Program Registration | <input type="checkbox"/> | \$160.00 |
| Confirmation 1 or 2 Retreat | <input type="checkbox"/> \$100.00 <input type="checkbox"/> \$250.00 | |
| Other Donation Amount for Confirmation / Youth Ministry: | \$ | |
| Completed Registration is due by Monday, August 5, 2024. Late Registration Fee, per family will apply after August 5. | | |
| | | Fee: \$40.00 |

Grand Total:

Checks payable to St. Norbert Church. All returned checks are subject to a \$25.00 fee.

Please select below for payment options and/or credit card payments.

| PAYMENT OPTIONS | <input type="checkbox"/> 1 Payment | <input type="checkbox"/> 3 Payments | <input type="checkbox"/> 4 Payments |
|-----------------|--|---------------------------------------|---------------------------------------|
| | 1 st : Aug. 15, 2024 (100%) | 1 st : Aug. 15, 2024 (50%) | 1 st : Aug. 15, 2024 (25%) |
| | | 2 nd : Nov. 15, 2024 (25%) | 2 nd : Nov. 15, 2024 (25%) |
| | | 3 rd : Feb. 15, 2025 (25%) | 3 rd : Feb. 15, 2025 (25%) |
| | | | 4 th : Apr. 15, 2025 (25%) |

CREDIT CARD PAYMENT

By selecting credit card payment, an invoice and link will be sent to you via email to pay by credit card online or in person.

☐ **Credit Card Payment**

The electronic invoice should be emailed to:

Completed Registration Form and certificates (*if applicable*) are due by **Monday, August 5, 2024.**

Late Registration Fee will apply after August 5.

Please submit copies of Baptismal and 1st Communion certificates upon registration. Registration requires these certificates, and a late fee applies if submitted after 8/5. If sacraments were received at St. Norbert Catholic Church (Orange, CA), no certificates are needed. Incoming Confirmation 2 teens do not need to resubmit certificates.

For Office Use Only

Completed Registration Received:

Invoicing / Payment Option Set-Up
Date:

All Payment(s) Completed
Date:



DIOCESE OF ORANGE

MINOR PERMISSION AND LIABILITY RELEASE FORM

ACTIVITY: St Norbert Youth Ministry

DATE & PLACE: September 2024- August 2025 | St Norbert Catholic Church & Retreats

SCHOOL/PARISH: St. Norbert Church

MINOR PARTICIPANT'S NAME: _____

DATE OF BIRTH: _____

CHECK ONE: ☐ FEMALE ☐ MALE

STUDENT'S CELL PHONE: _____ TEXT MESSAGING? ☐ YES ☐ NO

EMAIL: _____ EMAILING? ☐ YES ☐ NO

HOME ADDRESS OF MINOR: _____

MOTHER NAME: _____ CELL PHONE: _____

EMAIL: _____ TEXT MESSAGING? ☐ YES ☐ NO

FATHER NAME: _____ CELL PHONE: _____

EMAIL: _____ TEXT MESSAGING? ☐ YES ☐ NO

EMERGENCY CONTACT (ANOTHER CONTACT OTHER THAN PARENT(S) LISTED ABOVE)

NAME: _____ PHONE: _____ RELATION: _____

MEDICATION *During the above named activity, my child has my permission to take the following:*

Choose at least one:

- ☐ My child will be taking a prescription medication.

Name of medication: _____ Dosage: _____ Times per day: _____

- ☐ My child will be taking a non-prescription medication.

Name of medication: _____ Dosage: _____ Times per day: _____

- ☐ My child will not be bringing any medications, but I authorize, if needed, school/parish/diocesan staff to give my child non-prescription, over-the-counter, medications:

Notes:/Allergies/Medical Problems/Special Dietary Requirements: _____

*Parish program(s) are providing digital programming and content for its participants, through which staff will facilitate program activities through online platforms. The program(s) will use software, tools and applications provided by third-parties that participants, parents/legal guardians, volunteers and/or staff will access via the internet and use for purposes of communication and programming and potential content creation. This Form provides your consent and release for your child to participate in the program(s) and utilize these online applications for distance-based, digital program purposes only. **Many social media platforms have an age restriction which will always be adhered to by Diocesan staff or volunteers when facilitating activities with children and youth.***

Please be aware that each application collects different information about its users and has its own privacy terms and conditions to which members must adhere and which parish or diocese cannot control or assume responsibility. Please review these carefully before registering your child. Our commitment to keeping the children and youth we serve safe is always our number one priority. To that end, we will actively monitor participant activity. All online activities contemplated hereunder must also comply with the Diocese of Orange Pastoral Guidelines for Digital Evangelization including the Code of Conduct, Policy Against Sexual Misconduct and the Diocese of Orange IT Policy.

CONTINUE TO NEXT PAGE FOR FULL MINOR PERMISSION & LIABILITY RELEASE FORM COMPLETION

I, _____ grant permission for my child, _____

Parent or Guardian's Name

Child's Name

to participate in this school/parish/diocesan event AND to participate fully in any and all digital evangelization efforts. This activity or the efforts to participate in digital evangelization efforts will take place under the guidance and direction of school/parish/diocesan employees and/or volunteers from **St. Norbert Church**

As parent/legal guardian, I remain legally responsible for any personal actions taken by the above named minor participant.

I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend **St. Norbert Church**, its officers, directors, employees and agents, and the Diocese of Orange, its employees and agents, chaperones, or representatives associated with the event, from any claim arising from or in connection with my child attending the event or in connection with any illness or injury (including death) or cost of medical treatment in connection therewith, and I agree to compensate the parish/school, its officers, directors and agents, and the Diocese of Orange, its employees and agents and chaperones, or representative associated with the event for reasonable attorney's fees and expenses which may incur in any action brought against them as a result of such injury or damage, unless such claim arises from the negligence of the parish/school or the Diocese of Orange.

I authorize the making of photographs, motion pictures, video tapes, recordings or other memorializing of said event and my child's participation therein, and the publication and duplication or other use thereof. I waive any rights to compensation or any right that I otherwise might have to limit or control such making or use.

I give permission to the physician, nurse, dentist or licensed care staff selected by the supervisory personnel then present to render medical, dental or other appropriate treatment deemed necessary and appropriate by the physician, nurse, dentist or licensed care staff.

I understand that I will have access to everything provided to my child and be made aware of how social media is being used, be told how to access the sites, and be given the opportunity to be copied on all material sent to my child via social networking, including text messages.

I authorize and consent to staff or other leaders of the parish to communicate with my child electronically, including via social media, text, email, phone and video conferencing tools (e.g. Zoom) in accordance with the program(s).

I understand that if any staff or other leaders knowingly communicate privately with my child as a part of his or her duties for or on behalf of above named school/parish, reasonable steps will be taken to send to me the same communication content, though not necessarily via the same technology.

I acknowledge that to review or receive public communications shared via social media with my child, I will need to become a fan or follower of the same social media. I understand that communications or posts may be accessible or viewable by others who are also fans or followers of the same social media.

I understand that without this consent my child will not be able to participate in the program(s).

If I choose to rescind my authorization and consent provided herein, I agree that I will inform the parish listed above in writing and that my rescission will not take effect until it is acknowledged by the parish.

I understand, however, that it may not be possible to recall any work, photos or videos that have been published as part of the program(s) prior to receipt of my written rescission.

I have read this Consent and Release Form and have had the opportunity to consider its terms and understand them. I verify that I have read and voluntarily agree to the terms and conditions set out in this Consent and Release Form.

I further hereby hold harmless, release and forever discharge the Diocese of Orange and its employees, agents, licensees and legal representatives from, and shall indemnify them against, all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators or any other person(s) acting on my behalf or on behalf of my estate have or may have by reason of my child's participation in the program(s) and through my authorization, consent and release herein.

By signing this form and filling out my full address and city, I am stating that I have read this Consent and Release Form, I fully understand it, and I voluntarily agree to be bound by its terms. I represent and certify that I am the parent or legal guardian of the minor.

Parent Signature: _____ **Date:** _____

Parent Signature: _____ **Date:** _____

BOTH PARENTS/GUARDIANS ARE ASKED TO SIGN WHENEVER POSSIBLE OR APPLICABLE