



Our Lady of Lourdes Catholic Church

2025-2026 Family Faith Formation Registration

Kinder through 12th Grades

(ONE FORM PER FAMILY)

For Office Use Only

Parish ID _____

"Always be ready to give an explanation...for a reason for your hope." 1Peter 3:15

Today's Date: _____ Family email address: _____

Parents'/Guardians' Names in FULL:

Father (Last name, first name, middle Initial) : _____

Father Phone Number (s) (home): _____ (cell): _____ work): _____

Mother (Last name, first name, middle Initial) : _____

Mother Phone Number (s) (home): _____ (cell): _____ (work): _____

Mailing Address: _____

Street

City

State

Zip:

Name: (PLEASE INCLUDE LAST NAME, IF DIFFERENT)	Gender	Date of Birth	2025-2026 School Grade	Is this child baptized?	If yes, which Denomination	Sacraments Needed this year
				<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation
				<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation
				<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation
				<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation

Session Times

Grades K –12th:

Wednesdays, 6:00 pm to 7:15 pm

Sacrament Preparation:

(On specified Sundays)

Confirmation, after 10:00 AM Mass

First Reconciliation/Eucharist 6:00 PM

If your child has celebrated their 7th birthday and not baptized, please contact Raquel Hinojosa (rhinojosa@lolchurch.org)

Family Faith Formation Fee

\$50.00 per child supply/book fee x ____child(ren) = ____

\$50.00 Reconciliation/Eucharist book fee x ____child(ren) = ____

(To be eligible for First Eucharist Preparation, the child must be baptized, in 2nd grade or higher, and attended FFF in 2024-2025 with good attendance.)

\$50.00 Confirmation supply/book fee x ____youth = ____

Total Fees _____

For Office Use Only:

Payment date: _____ Cash/Check #: _____ Amount: _____ Receipt #: _____ Received by: _____

Notes:

Our Lady of Lourdes Catholic Church

Parent/Guardian Consent/Liability Waiver Form

This page MUST be submitted with the registration form

Name of child—PLEASE PRINT

Please list any learning or physical challenges, or **allergies** that you child might have:

Permission For Child To Attend Faith Formation Virtually

“By registering your child(ren) for faith formation you give permission to the parish to provide its catechists with access to your child(ren) for the purpose of catechesis. Depending on the circumstances and the program, this access may be face-to-face in a parish facility, or may be on a virtual platform approved and overseen by the parish, or both. All catechists have been cleared by the Archdiocesan Office of Child and Youth Protection to work with minors and have completed all required safe environment training.”

Signature of Parent/Guardian: _____ **Date:** _____

MEDICAL CONSENT

In the event of an emergency, I hereby give permission to the staff of Our Lady of Lourdes Catholic Church to seek emergency medical transport and/or treatment for my child(ren) named above. I will be responsible for all costs incurred. I wish to be advised before further care is given by the hospital or doctor. If I cannot be reached, contact:

Name and Relationship: _____ Phone (____) _____

Family Doctor: _____ Phone (____) _____

Insurance Name: _____ Group Number: _____

Insurance Phone Number: _____ ☐ Check here if not insured

CONSENT AND LIABILITY WAIVER

In the event of any accident or injury, I agree on behalf of myself, my child(ren)'s other parent, if known or living (name of other parent) _____, the child(ren) named above, or our heirs, successors, and assigns, to hold harmless and defend the Archdiocese of Galveston– Houston, its pastor or any representation of Faith Formation and Youth Ministry, unless the parties involved were careless and **negligent**.

Signature of Parent/Guardian: _____ **Date:** _____

VIDEO/PHOTOGRAPHY CONSENT

As parent/guardian, I understand that promotional pictures and videos (individual and group) may be taken during Pre-K, Elementary, Junior High, and High School Faith Formation classes or other activities. I give permission for my child(ren)'s pictures to be used for church promotional materials, such as newsletters, web pages, calendars, bulletin boards, Power Point presentations, or videos to promote or highlight these classes or activities.

Signature of Parent/Guardian: _____ **Date:** _____