Our Lady of Grace Youth Ministry

Student Registration 2023-24

Our Lady of Grace Catholic Church, 6 Roosevelt Blvd., Beverly Hills, FL 34465 – Phone 352/746-2144

STUDENT NAME:			Dat	e of Birth	/	/
FIRST						
SCHOOL : (Students must be in 6 th grade	or above to	participate)				
St JP II7 Riv.PresbCSMS				Home scho	ooled	Out of school
LHSCRHSCitrusTrin						
Special talents, gifts, interests:						
STUDENT NAME:			Dat	e of Birth	/_	/
FIRST	MI	LAST				
SCHOOL : (Students must be in 6 th grade	or above to	participate)				
St JP II7 Riv.PresbCSMS					_	
LHSCRHSCitrusTrini	ity HS	College	Other			
Special talents, gifts, interests:						
STUDENT NAME:			Dat	e of Birth	/	/
STUDENT NAME:FIRST	MI	LAST		· —		
SCHOOL : (Students must be in 6 th grade						
St JP II7 Riv.PresbCSMS				Home scho	ooled	Out of school
LHSCRHSCitrusTrini	ity HS	College	Other			
Special talents, gifts, interests:						
LIGATE BLIGATE COLL		Г жа				
HOME ADDRESS:						
HOME ADDRESS:						
City:				ZIP:		
MAILING ADDRESS (if different from abo	ove j. 					
Parent/Guardian		Rel	ationship		(mo	ther/father/other)
Address:Same as Student OR:						
Phone:Same OR:	Ce					
E-Mail:						
						ther/father/other)
Address:Same as Student OR:						
Phone:Same OR:	Ce	ell:				
E-Mail:						
PLEASE LIST ANY ALLERGIES OR SPECIAL	. MEDICAL C	CONDITIONS	:			
In Case Of Emergency Contact				Relationship _		
						لاه
PARENT PERMISSIONS (for youth under 18) Student listed above has my permission to p		the activities o	f Vauth Mini	ctu.		XX
Signed	•	Date		stry.		3(7)
Parent/Guardian		Date				

Please fill-out back as well. Thank you!

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ANNUAL PARENTAL PERMISSION/RELEASE for Communication and Photos

Method of Communication Release:

During the year your teenager is a member of the parish youth ministry, we do try to keep them up-to-date with dates for
meetings and/or changes in our calendar of events. With the implementation of the Safe Environment policies within the
Diocese of St. Petersburg, we are now seeking your permission for these items.
Yes, I give (my youth/participant) permission to communicate with the Parish Coordinator of Youth Ministry and/or youth ministry team leaders through the use of his/her:
(please check all that apply)
☐ Email address
□ Facebook
☐ Instant Messaging
☐ Home phone
□ Cell phone
☐ Text message
□ Postal mail
I also give permission for the Parish Coordinator of Youth Ministry and/or youth ministry team leaders to use this contact information to communicate with him/her. We understand that any addresses received through the parish youth ministry will <i>only</i> be used for the parish youth ministry purposes
No, I do not give (my youth/participant) permission to communicate with the Parish Coordinator of
Youth Ministry and/or youth ministry team leaders through the use of his/her (please check all that apply)
□ Email address
□ Facebook
☐ Instant Messaging
☐ Text message
☐ Home phone
☐ Cell phone
□ Postal mail
□ 1 Ostai iliali
I, as parent/guardian, would also like to receive an email update of all dates for meetings and/or changes in the calendar of events. My email address is:
Publicity/Photo/Video Release:
From time to time, publicity releases for newspapers, television, website, and other media may be prepared
about events occurring at the parish. These may or may not be accompanied by photos or videotape of students
The releases may be prepared by Parish or media representative.
Yes, I do give permission for my student(s) name and likeness to be included in such publicity releases/photos/videos.
No, I do not give permission for my student(s) name and likeness to be included in such publicity releases/photos/videos.