PARISH OF THE HOLY SPIRIT
2026-2027 Registration Information
Religious Education

Elementary: Ages 4-Grade 5 TUESDAYS 4:00-5:15 pm
Starts Tuesday, September 15, 2026

Edge: Grade 6-8 SUNDAYS 6:30-8:00 pm
*Starts September 20, 2026: A **Parent Meeting will also be held at 3:30pm on September 20th**.*

Life Teen: Grade 9-12 SUNDAYS 6:30-8:00 pm
Starts September 20, 2026
Dinner is provided for students after the 5:00 pm Mass before Life Teen/Edge. Parents, please sign up for 2 times for the year to help serve, a link will be sent.

Confirmation: Grade 8 Super Sundays 1:30-4:30 pm(*once a month*)
*A **Parent Meeting** will be held on **September 13th at 2:00 pm**, and a schedule for the year will be given out then. **Attendance at all other Edge meetings is also required**.*

PLEASE REGISTER BEFORE SEPTEMBER 1st TO SAVE YOUR SPOT! *After September 1st, qualified students from other parishes may register.*

How to register:

1. Please print out the Registration Form, one per family and Health Form, one per student, from the website OR find blank copies in our bulletin bin (vestibule) or at the Parish Office.
2. Mail, drop off the forms at the Parish Office or the Sunday collection basket, along with your tuition payment:

Parish of the Holy Spirit
7411 W. Clearwater Ave, Suite A
Kennewick, WA 99336

Tuition:

One student	$35.00
Two students	$60.00
Three or more students	$85.00

*Because there are extra texts, resources and activities for **sacrament prep classes**, an additional $20 fee per child is requested to help cover these costs.*

Contact Information:

Elementary:	Karen Gorham	735-8558	karen@holyspiritkennewick.org
Edge:	Danielle May	528-9780	edgehs99336@gmail.com
LifeTeen:	Joe Bliss	(216) 402-3118	lifeteenhs@gmail.com
	Jennifer Moore	492-6209	lifeteenhs@gmail.com
Confirmation:	Carol & Mike Gaulke	551-7626	micajere@msn.com

Sacrament Preparation

Each sacrament, First Reconciliation and First Eucharist, or Confirmation, will have one or more meetings for the parents as part of the preparation requirements.

First Reconciliation and First Communion:

Preparation for these sacraments is a **two-year program**. Generally, students in second grade will be preparing for the sacraments of First Reconciliation and First Communion provided they attended Religious Education classes or Catholic school the previous year. If not, students will be placed in the first-year preparation class. Students enrolling in this program must be baptized Catholics. Students not baptized in the Catholic Church will require additional preparation in the OCIC process (Order of Christian Initiation of Children). Parents who home school their children are to contact the Director of Religious Education for inclusion of their children in sacramental preparation.

First Reconciliation Parent Meeting is Sunday, September 20, 2026 at 11:00 am in PCC Room 7

Confirmation for 8th Grade Students:

Preparation for the sacrament of Confirmation is a **two-year program**. Students in the 8th grade may be Confirmed in the spring of 2027 if they have completed a previous year in the Edge program with good attendance. Students enrolling in this program must be baptized Catholics who have already received the sacraments of Reconciliation (Confession) and First Eucharist. **A mandatory parent meeting is scheduled for *Sunday, September 13th at 2:00 pm*** in the PCC hall to discuss the requirements and the schedule for Confirmation preparation.

High School Confirmation:

All high school students who wish to be confirmed need to have one year of Edge or Life Teen with good attendance in the year preceding Confirmation classes. This preparation program is intended for high school youth who are baptized Catholics who have already received the sacraments of Reconciliation (Confession) and First Eucharist. ***Attendance at all other Life Teen meetings is also required.***

Mandatory for All Sacrament Preparation Students:

Please send a copy of your child's baptismal certificate (and First Communion certificate for those preparing for Confirmation) along with the registration form. Your child will not be permitted to receive a sacrament without submitting this documentation. If your child was baptized at the Parish of the Holy Spirit, please just let us know to look for the copy in our parish records.

If you have any questions, please feel free to contact Karen Gorham, Director of Religious Education, at (509) 735-8558 or karen@holyspiritkennewick.org.

RELIGIOUS EDUCATION REGISTRATION
PRESCHOOL- GRADE 12
PARISH OF THE HOLY SPIRIT
2026-2027

FAMILY INFORMATION:

Family Last Name: _____ Email: _____

Father: _____ Cell:_____

Mother: _____ Cell:_____

Address: _____

Emergency Contact:_____Emergency Phone:_____

STUDENT INFORMATION:

Student Name: _____ Nickname:_____

Gender: Male___ Female___ Birthdate:_____ Grade:_____

Has Your Child Received: Baptism___ Eucharist:_____ Confirmation:_____

Is your child preparing for a sacrament this year? _____

Special Considerations for Teachers to Know:

_____

_____

STUDENT INFORMATION:

Student Name: _____ Nickname:_____

Gender: Male___ Female___ Birthdate:_____ Grade:_____

Has Your Child Received: Baptism___ Eucharist:_____ Confirmation:_____

Is your child preparing for a sacrament this year? _____

Special Considerations for Teachers to Know:

_____

_____

If your child will be preparing for a sacrament this year, please provide a copy of the Baptism (and First Communion if preparing for Confirmation) certificate along with this registration form. If your child was baptized at Holy Spirit, please let us know so we can find the record.

STUDENT INFORMATION:

Student Name: ______________________________ Nickname:___________

Gender: Male___ Female___ Birthdate:__________ Grade:_____

Has Your Child Received: Baptism___ Eucharist:____ Confirmation:____

Is your child preparing for a sacrament this year? ___________________

Special Considerations for Teachers to Know:

____

____

STUDENT INFORMATION:

Student Name: ______________________________ Nickname:___________

Gender: Male___ Female___ Birthdate:__________ Grade:_____

Has Your Child Received: Baptism___ Eucharist:____ Confirmation:____

Is your child preparing for a sacrament this year? ___________________

Special Considerations for Teachers to Know:

____

____

STUDENT INFORMATION:

Student Name: ______________________________ Nickname:___________

Gender: Male___ Female___ Birthdate:__________ Grade:_____

Has Your Child Received: Baptism___ Eucharist:____ Confirmation:____

Is your child preparing for a sacrament this year? ___________________

Special Considerations for Teachers to Know:

____

____

If your child will be preparing for a sacrament this year, please provide a copy of the Baptism (and First Communion if preparing for Confirmation) certificate along with this registration form. If your child was baptized at Holy Spirit, please let us know so we can find the record.

PARENTAL/GUARDIAN MANDATORY HEALTH FORM AND LIABILITY WAIVER
Diocese of Yakima and the Parish of the Holy Spirit

Please print

Name of Student_____ Date of Birth_____ Grade____ Sex____

Address _____ Phone _____
Street City State Zip

EMERGENCY CONTACT PERSON:

Parent/Guardian Name _____ Home Phone _____

Work phone _____ Cell phone_____ Work Phone_____ Cell phone _____

Address (if different from student) _____

ALTERNATE CONTACT PERSON: (use someone near the primary contact)

Name _____ Relationship to student_____

Address _____
Street City State Zip

Home Phone _____ Work Phone _____ Cell _____

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I, _____, permit _____ to take part in classes, youth activities, field
Print parent/guardian name Print student name

trips, and other activities sponsored by the Parish of the Holy Spirit, Kennewick, WA, whether said function is held in the city of Kennewick or out of town. As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor student. I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend the Parish of the Holy Spirit, its teachers, its officers, directors & agents, and the Diocese of Yakima, chaperones or representatives associated with any of the above mentioned activities, arising from or in connection with my child attending the activity or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors and agents, and the Diocese of Yakima, chaperones, or representatives associated with the activity for reasonable attorney's fees and expenses arising in connection therewith. I give permission to use photos or videos of my child taken during program activities for future program promotion purposes.

Signature of parent/guardian_____ **Date**_____

Emergency Medical Treatment: In the event of an emergency, I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the above numbers, contact the "Alternate Contact Person" I have listed above.

Signature of parent/guardian_____ **Date**_____

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Insurance information: Family Physician name and phone_____

Family Health Plan Carrier _____ Policy Number _____

Specific Medical Information: The parish will take reasonable care to see that the following information will be held in confidence.

Medications presently taking:_____

Date of last tetanus/diphtheria immunization: _____

Allergic reactions (medications, foods, plants, insects, etc.):_____

Any physical limitations _____

Other information regarding you child's physical, medical, or emotional well-being which will help us to best meet his/her needs:_____