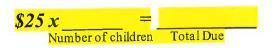
Saint Patrick Religious Education Registration Form (K-5) 2025-2026

PARENT/GUARDIAN INFO	RMATION						
Parent/Guardian Names		Relationship to child					
Address			City	State	Zip		
Email address	Home Phone						
Adult 1 Cell Number		A	dult 2 Cell Number				
Member of what church?			_School that child(ren) attend			
Emergency Contact Name/Nu	mber:						
YOUTH INFORMATION					Baptism?	Eucharist?	
Name	Birth Date (Mo/Day/Yr)	Grade	Cell Number		Вар	Euch	
					Y N	Y N	
Medical Information to	he aware of	f.					
Child's Name		= cal Con	cerns				
			. () (1 P	Ting only, IE +h	ou wore N	OT bantize	
Please get a copy of your chione the churches in our Famione:	ld/ren's birth ly of Parishes	certification. If they	were baptized in our	Family of Par	ishes, pleas	se circle w	
St. Patrick – O'Neill	St. Joseph - Amelia St. Joseph - Atkinson St. Boniface - Stud						
SHRC _ Ss Peter & Paul - Ru	tte	SHBC	C – St. Mary - Spencer	SHB	C - ABVM	- Lynch	

If you have a child or children that are above the age of 8 and have NOT received their 1 st Reconciliation and/or 1st Communion, or a child that is older and has not received their Confirmation, please contact the Parish Office for information on classes.

We ask that each family pay \$25/child or \$50/family to help offset the costs of the books and supplies. Please note: do NOT let finances be the reason you do not participate. Call the Religious Education coordinator at 402-336-1602 for assistance.



Checks can be made payable to St. Patrick Catholic Church & included with registration.

The success of the Religious Education program at St. Patrick is dependent on our volunteers, families, and especially parents of the children. Your children's spiritual well-being, as well as all that of the other children is worth sharing a few hours a month of your time. (All adults must be safe environment trained.) Please indicate how you will help below:
I am glad to be a co-teacher for a Wednesday evening class. (Preferred Grade: I am happy to substitute in for teachers as needed. I am happy to assist in the classroom as needed. Call me as you need me! Are you safe environment trained? YES or NO

Please complete the Release form on the following page.

RELEASE FORM FOR CHILDREN

	We give permission for our child, while under the direction/care of St. Patrick Catholic Church, O'Neill, Nebraska, Youth Ministry leaders, to have photos/videos/images taken, displayed, or used for record keeping, promotion, outreach, and celebratory purposes. I/we authorize church pastoral staff, volunteer youth advisors, and leaders to photograph, video record, and use said media for church ministries.
VES OF NO	

- YES or NO I grant permission in the event I/my child is injured or becomes ill for medical care to be administered to me/my child and to use my/our personal insurance to cover such incidents. I hereby give permission to the physician selected to render medical treatment deemed necessary and appropriate by the physician.
- YES or NO In the event it comes to the attention of the archdiocesan and/or parish chaperones that my child complains of illness, I grant permission for non-prescription medication (such as Tylenol, lozenges, etc.) to be given to my child.

The undersigned do hereby release, forever discharge and agree to hold harmless St. Patrick's Parish and the Archdiocese of Omaha from and against any and all kind of liability, claims, demands, lawsuits, and expenses of any kind arising from personal injury, sickness, death or property damage of any kind whatsoever which may be incurred or suffered by the undersigned and/or the undersigned's minor child(ren).

The undersigned further agree to indemnify and hold harmless St. Patrick's Parish and the Archdiocese of Omaha and its respective members, officers, directors and employees, agents, sponsors and promoters from any and all liability, claim, loss, damage, cost or expense and waive any such claims against persons or organizations arising directly or indirectly from or attributable in any action or omission to act of any such person or organization in connection with the sponsorship, organization and execution of the youth ministry events on St. Patrick's property or at events for St. Patrick's Youth Group.

*Signature of Parent/Guardian	
*Required if participant is under 19.	Date