

EPIPHANY CATHEDRAL CATHOLIC CHURCH



**FAITH FORMATION
REGISTRATION PACKET
2026- 2027**

Epiphany Cathedral Church

Religious Education/Faith
Formation Department



Dr. David Tomasic OFS

MISSION

In the spirit of the Great Commission as articulated in Matthew 28, the Religious Education Department of Epiphany Cathedral Catholic parish embraces its calling to be catechetical missionaries of the Gospel. As catechists, we are committed to being the heart and hands of Christ, guiding our youth in a profound journey of faith formation that encompasses mind, heart, soul, and body.

Our mission is to provide a comprehensive religious education and formation experience that not only imparts knowledge of our Roman Catholic faith but also fosters a personal relationship with Our Lord Jesus Christ and His Church, encouraging a lifelong journey of faith, service, and discipleship. Together, as catechists, we seek to build a vibrant, family-centered community that actively brings in parents and families of our children, who are the first teachers of the faith, all for the purpose of teaching the love of Christ to our youth, preparing them for living out their discipleship in daily life.

VISION

Through our dedicated catechists, we strive to cultivate an environment of love, understanding, and reverence for Our Lord Jesus Christ, instilling a commitment to the teachings of His Church. We aim to nurture the spiritual development of our students with the active participation and engagement of parents and families, helping our youth to encounter Christ in their daily lives and empowering them to live out their faith authentically within the parish community and beyond.

OUR CATECHISTS:

Mary Ann Cotroneo..... K-1

Sheila Haase..... 2nd grade

Rosemary Durant3rd/4th grade

Donna Cox.....5th/6th grade

Ann Koehan.....7th/8th grade

Confirmation I..... Josh Mihn

Confirmation II.....Valeria Calderon



Faith Formation Registration Form (Grades K – 11)

This registration form is for Faith Formation kids in Grades K – 11. It is our expectation that students will attend each week with minimal absences.

Class: Sunday 10am-11am

Parent / DRE Meeting: September 20, 2026

Mother (Guardian) Info

Full Name _____

Cell Phone _____ Religion _____

Email _____

Father (Guardian) Info

Full Name _____

Cell Phone _____ Religion _____

Email _____

Address

Street _____

City/State/Zip _____

#1 Student Info

Full Name _____

Date of Birth _____

School/Grade _____

Attended Last Year _____

Sacraments Received: _____ Baptism _____ First Communion _____ Confirmation

Received here Yes No (If not, provide Sacramental Certificates) _____



Faith Formation Registration Form (Grades K – 11)

Additional Student Section & Payment Information on the Back

#2 Student Info

Full Name _____
Date of Birth _____
School/Grade _____
Attended Last Year _____
Sacraments
Received: _____ Baptism _____ First Communion _____ Confirmation
Received here Yes No (If not, provide Sacramental Certificates) _____

#3 Student Info

Full Name _____
Date of Birth _____
School/Grade _____
Attend Last Year _____
Sacraments
Received: _____ Baptism _____ First Communion _____ Confirmation
Received here Yes No (If not, provide Sacramental Certificates) _____

Registration Information

Registered Family \$50 for 1 child / \$75 for 2 children or more _____
Non-Registered \$75 / child _____

No family is ever turned away because of money. Please let us know if we can assist you in any way.

Diocese of Venice in Florida, Inc.

MEDICAL AUTHORIZATION FOR MINOR

NAME OF MINOR: _____ D.O.B. _____ Grade _____

NAME OF MINOR: _____ D.O.B. _____ Grade _____

NAME OF MINOR: _____ D.O.B. _____ Grade _____

PARISH: Epiphany Cathedral

HOME ADDRESS: _

City _____ State _____ Zip _____

PARENTS/GUARDIANS: _____

PHONE #s: CELL-1: _____ CELL-2: _____

HOME: _____ WORK: _____

EMERGENCY CONTACT: _

PHONE: _____

MEDICAL INFORMATION: Please list **ALL** pertinent medical information (for example, allergies, medications, physical and mental impairments, or any other information necessary in an emergency).

Explain fully:

In case of illness or injury of the above student(s), reasonable effort will be made to contact the parent(s)/legal guardian(s)/emergency contact. In case of a medical emergency, 911 will be called. In the event that the parents/legal guardian(s)/emergency contact cannot be notified or are not available, I (we) authorize parish, school, or other pertinent diocesan officials to consent to any x-ray examination, anesthetic, medical or surgical treatment, and/or hospital care, as determined to be necessary and appropriate by a licensed physician in the State of Florida. This authorization is valid for a period of 1 year from the date of execution.

Signature of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Date _____



Diocese of Venice in Florida

**AUTHORIZATION FOR RELEASE AND USE OF IMAGE
IN PHOTO, VIDEO FILES OR OTHER MEDIA**

Name		DOB	Grade
Name		DOB	Grade
Name		DOB	Grade

School/Parish/Diocesan’s Entity: Epiphany Cathedral

I, the undersigned adult participant or parent/legal guardian of the above-named minor participant hereby grant to the above-named School/Parish/Diocesan Entity the following irrevocable rights:

1. To use the name, photograph, picture, portrait, voice, appearance, likeness, performance (hereinafter collectively known as “image”) of the above-named participant in connection with its educational, promotional, fund-raising activities, or for any other legitimate purpose.
2. The right to use, reproduce, publish, exhibit, distribute, and transmit the image of the above-named participant individually or in conjunction with other images or printed matter in the production of brochures, slides, motion pictures, broadcasts (radio and television), audio or video files, recordings, still photography, CD-Rom and any other manner of media now known or later developed.
3. The right to use, reproduce, publish, exhibit, distribute, and transmit the image of the above-named participant individually or in conjunction with other images or printed matter on the School/Parish/Diocesan’s entity Internet web site. No personal information such as home address or phone numbers will be published.
4. The right to record, reproduce, amplify, edit, and simulate the above-named participant’s image and all sound effects produced; and
5. The right to copyright, in its own name, works that contain the image of above-named participant; and
6. The right to assign the above-mentioned rights to third parties.

I understand that the video files, still photos, or other media incorporating the image of the above-named participants will become the property of the School/Parish/Diocesan’s entity. I hereby waive the right to inspect or approve my minor’s image or any finished materials that incorporate said image.

I understand and agree that no compensation will be provided, now or in the future, in connection with the use of named participant’s image, and nothing herein will create any obligation on the part of School/Parish/Diocesan’s entity to make use of the rights or materials set forth herein.

I hereby release and forever discharge Frank J. Dewane, as Bishop of the Diocese of Venice, his successors in office, a corporation sole, Epiphany Cathedral, Catholic School/Parish/Diocesan Entity, their agents, employees and assigns from any and all claims demand, rights, and causes of action of whatever kind that may arise from the use of above named participant’s image, including all claims for libel and invasion of privacy.

I hereby certify that I am the above-named participant or the parent/legal guardian of the above referenced minor, and I give my consent, without reservation, to the above agreement on behalf of myself or said minor. This agreement shall be valid for a period of four years from the date hereof, unless revoked in writing.

Parent/Guardian’s Signature

Date

Print Parent or Guardian Name					
Address				Phone	
City		State		Zip	



DIOCESE OF VENICE IN FLORIDA
CONSENT, RELEASE OF LIABILITY AND INDEMNIFICATION FORM
FOR TRIPS, PROGRAMS AND EVENTS

NAME OF PARTICIPANT(S)*

1 _____ DOB: _____

2 _____ DOB: _____

3 _____ DOB: _____

**See attached list for all family members attending*

ADDRESS _____ PHONE: _____

ALTERNATE PHONE: _____ E-MAIL _____

SCHOOL/PARISH/DIOCESAN ENTITY _____

NAME OF TRIP, EVENT OR PROGRAM _____

I, the undersigned adult participant or parent/legal guardian of the above named minor participant (for myself and any named minor, our heirs, personal representatives, assigns and next of kin), request permission to participate in this particular event and/or the various field trips and other on and off site activities of the above school/parish/diocesan entity programs throughout the year. I understand that I will receive notice of scheduled field trips and events via an Event Notification Form, if applicable, and my signature consenting to my or my minor's participation shall also indicate the inclusion of the terms of this Consent, Release of Liability and Indemnification Agreement to each trip or event. In consideration for the agreement by the school/parish/diocesan entity to permit my/minor's participation, and intending to be legally bound, I, individually and on behalf of my youth, do hereby:

1. Release, discharge and covenant not to sue the Diocese of Venice in Florida and the Most Rev. Frank J. Dewane, Bishop of the Diocese of Venice, individually and as a corporation sole, the above Parish/School/Diocesan Entity; and their employees, clergy, agents and volunteers (hereinafter Releasees), from any claim, demand, action, or liability whatsoever on account of injury or loss to the person or property of minor child or adult in conjunction with said event, including travel to and from, whether caused by the negligence of the Releasees or otherwise, excluding acts of gross negligence or intentional misconduct;
2. Indemnify and hold harmless the Releasees and each of them from any loss, liability, damage or cost they may incur incident to adult or minor's participation in the above event, whether caused in whole or part by the negligence of Releasees or otherwise;
3. I do further agree that school/parish/Diocesan entity/Diocese of Venice officials, agents, and/or employees have the right to terminate the participation of the above named for reasonable cause, as determined within the discretion of the event/trip leader. In such event, only the funds not actually used will be refunded. I will be responsible for any and all travel costs incurred to return the above named early from the event/trip.
4. I understand that throughout the year I/my minor may be informed via an Event and Trip Notification Form of activities apart from those on-site activities which are school/parish sponsored. If I do not give permission and sign the Event and Trip Notification Form, I am responsible for myself or the supervision of my minor at such event should I choose to attend independently of the program, although agents, employees and volunteers of the school/parish youth program/Diocesan entity/Diocese of Venice may also plan to be present at such events.
5. I understand that the school/parish/Diocesan entity youth programs may include sports (football, swimming, wrestling, etc.) and/or other risky activities (rafting, etc.). These sports activities involve certain risks including, but not limited to, travel to and from the site of the activity, severe physical contact, and the possible reckless conduct of other participants. These risks also include, but are not limited to, serious

injury, potential for permanent paralysis, or death. The sporting activities may be conducted at sites that are at some distance from available medical assistance, and any equipment provided for protection may be inadequate in preventing serious injury.

6. I understand and assume the risks inherent with any extended event, which may involve certain risks beyond the reasonable control of the Parish/school/Diocesan entity and the Diocese of Venice, and their respective representatives, volunteers and agents. Such risks may include but not be limited to accidents, emergencies, exposure to nature and the elements, and/or negligence of the staff of the independent entity at the location of the event (not Parish or School staff). The Parish/school/Diocese or Diocesan entity disclaim any and all responsibility for any such risks by such independent vendors.
7. I am also aware that all reasonable care and supervision will be exercised by the Adult Chaperones to provide for the general well-being of my youth. However, I understand that there will be times when my youth is not directly supervised and it is impossible for the Adult Chaperones to supervise my youth every minute of every day while attending this program/event. I acknowledge placing my trust in my youth to adhere to proper standards of conduct and to follow the rules of the Group Leaders and Adult Chaperones, especially when not being directly supervised. I understand and assume the risks described above and those inherent with such a program/event.
8. I further represent that the above named is covered by accident and health insurance, and I agree to maintain coverage in full force and effect for the duration of the year. I have completed a Medical Authorization which is on file with the sponsoring school/parish/Diocesan entity in the event emergency medical care is required. I understand that the school/parish/Diocesan entity/Diocese of Venice provides no insurance which will cover my child in conjunction with future trips. I agree to full financial responsibility for any medical treatment provided to him/her.

Adult Participant Signature: _____ Date: _____

Parent/Guardian of a Minor Signature _____ Date: _____

*Additional family members participating:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____



Faith Formation Calendar 2026 – 2027

SEPTEMBER 2026

- 12 Kick Off (6pm)
- 20 Class & Parent Meeting
- 27 Class

OCTOBER 2026

- 4 Class
- 11 Class
- 18 Class
- 25 Class

NOVEMBER 2026

- 1 Class
- 8 Class
- 15 Class (No Confirmation I & II)
- 22 Class
- 29 **No Class (Thanksgiving)**

DECEMBER 2026

- 6 Class
- 13 Class
- 20 **Family Advent Pageant**
- 27 **No Class (Christmas Break)**

JANUARY 2027

- 10 Class
- 17 Class
- 24 Class
- 31 Class

FEBRUARY 2027

- 7 Class
- 14 **No Class (President's Day)**
- 21 Class
- 28 Class

MARCH 2027

- 7 Class
- 14 Class
- 21 **Palm Sunday Pageant**
- 28 **No Class (Easter Sunday)**

APRIL 2027

- 4 Class
- 11 Class
- 18 Class
- 25 Class

MAY 2027

- End of Year Party

CATHOLIC PARENTS BREAKFAST CLUB

Oct. 18

Nov. 8

Dec. 13

Jan. 17

Feb. 21

March 7

April 11

April 25

OTHER PARISH Family EVENTS

Dec. 12-15 – Parish Advent Mission

Jan. 6 – Feast of the Epiphany

Feb. 6 – Mardi Gras Festival

Feb. 10 – Ash Wednesday

TBD – Parish Lenten Mission

FIRST COMMUNION IMPORTANT DATES

Apr. 10 @ 10am - First Reconciliation (Sat)

Apr. 14 @ 6pm - First Reconciliation (Wed)

Apr. 28 @ 6:30pm - First Communion Practice

May 1 @ 10am - First Communion

May 2 @ 9am - May Crowning

CONFIRMATION IMPORTANT DATES

Oct. 24 @ 9am – Yr II Confirmation Retreat

Nov. 14 @ 12pm- 9pm – Youth Rally

Dec. 4 @ 6pm – Confirmation Rehearsal

Dec. 5 @ 10am – Confirmation

