

# St. Florian Faith Formation Registration Form 2017/2018

Name:

Birthdate:

Grade:

Address:

Home Phone Number:

Parish of Registration (if other than St. Florian):

Sacraments Received:

Baptism: Date Parish

Eucharist: Date Parish

Parents Information:

Mother's Name:

Religion:

Mother's Address:

Cell Phone:

(if different from child)

Father's Name:

Religion:

Father's Address:

Cell Phone:

(if different from child)

Parents email:

Medical:

Allergies, Disabilities or other Medical conditions:

Emergency Contact Information:

Name:

Relationship:

Phone:

Name:

Relationship:

Phone:

Tuition Information:

\$15 per child, \$25 per family

Photographic Release Letter

I hereby grant to the Diocese of Greensburg, Pennsylvania, and its respective licenses, successors and assigns, the right and permission, with respect to those photographs taken of me or the minor named below on whose behalf I am signing and with respect to any printed or electronic matter in connection therewith, to do the following:

1. To include such photographs on the Diocese of Greensburg website
2. To include such photographs on the St. Florian Parish Website
3. To use my name or the name of the minor on whose behalf I am signing, in connection with the foregoing.

I hereby release, discharge and agree to indemnify and hold harmless the Diocese of Greensburg and its legal representatives, licenses, successor and assigns, from all claims and demands whatsoever arising out of or in connection with the foregoing and waive any right to inspect or approve the same.

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Signature of Parent/Guardian

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Print Name

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Signature of subject of Photograph

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Print Name

I hereby certify that I am the (parent and/or legal guardian of \_\_\_\_\_), a minor under the age of eighteen years and hereby consent of behalf of said minor to the use of any of the photographs taken of said minor pursuant to the terms set forth in this photographic release, including, without limitation, the release, discharge and hold harmless provisions thereof.