

2024-2025 YOUTH MINISTRY REGISTRATION FORM

ST. ANNE'S CHURCH, 115 VODDEN STREET EAST, BRAMPTON, ON |
905.453.1303

Monthly schedule:

Every Friday: Tiny Treasure (JK - Gr.2)

Every Friday: Jr. EDGE (Gr. 3- Gr. 5)

Every Friday: EDGE (Gr. 6 - Gr. 8)

2nd and 4th Saturday: LifeTeen (Gr. 9 - Gr. 12)

Registration Form is valid from September 20, 2024 to June 20 , 2025

STEP 1: Complete this Registration form

STEP 2: Submit Registration Fee of \$25.00 x 2 (per semester) = \$50.00 per year

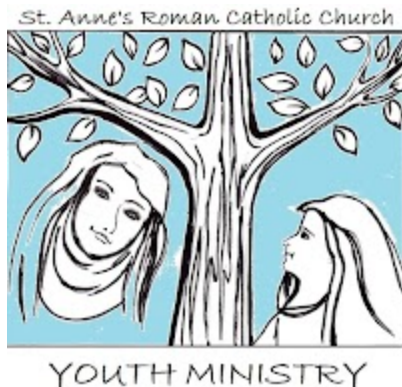
STEP 3: Please sign in your child each week in the foyer upon arrival.

STEP 4: Be safe and have Fun in Faith & Fellowship!

* Indicates required question

1. Email *

PRAY FOR OUR CHILDREN AND VOLUNTEERS !



YOUTH's INFORMATION

One Child Per Form please.

2. First and Last Name *

Enter youth's full name

3. Gender *

Mark only one oval.

Male

Female

4. Age of Youth *

Enter the age of your child

5. Birthday *

MM/DD/YYYY

Example: January 7, 2019

6. School Grade *

Please click on the school grade your child currently attends:

Mark only one oval.

- JK (3.5 to 4 years old)
- SK (5 to 6 years old)
- Grade 1 (6 to 7 years old)
- GRADE 2 (7 to 8 years old)
- GRADE 3 (8 to 9 years old)
- GRADE 4 (9 to 10 years old)
- GRADE 5 (10 to 11 years old)
- GRADE 6 (11 to 12 years old)
- GRADE 7 (12 to 13 years old)
- GRADE 8 (13 to 14 years old)
- GRADE 9 (14 to 15 years old)
- GRADE 10 (15 to 16 years old)
- GRADE 11 (16 to 17 years old)
- GRADE 12 (17 to 18 years old)
- Other (University)

7. T-shirt Size

Mark only one oval.

- Youth XS
- Youth S
- Youth M
- Youth L
- Youth XL
- Adult XS
- Adult S
- Adult M
- Adult L
- Adult XL
- Adult XXL
- Adult 3XL
- Adult 4XL
- Adult 5XL

PARENTS' INFORMATION

Mandatory to enter Primary caregiver of child; Optional to enter Secondary caregiver of child. Please type carefully and accurately the information requested below.

8. 1 - Parent/Guardian's First and Last Name *

[First Name, Last Name]

9. 1 - Primary Phone Number *

(Preferrably a mobile phone number) Format: xxx-xxx-xxxx

10. 1 - Secondary Phone Number

11. 1 - Primary Email Address *

(Highly Recommended to receive communications from our Ministry) *** Please type accurately.

12. 2 - Parent/ Guardian's First and Last Name

[First Name, Last Name] *Optional

13. 2 - Primary Phone Number

14. 2 - Secondary Phone Number

15. 2 - Secondary Email Address

(Highly Recommended to receive communications from our Ministry)

EMERGENCY CONTACT INFO

In the unlikely event of an emergency, we need to know WHO to contact immediately. All Fields are mandatory.

16. Emergency Contact's First and Last Name *

17. Relationship to the Participant *

18. Mobile Phone Number *

ALLERGIES & MEDICATION

We will have a small individually packaged snack for all children in the ministry each week, therefore it is very important that we are aware of any food allergies or dietary restrictions. Any changes throughout the year, it is much appreciated to notify us of any updates.

19. Food Allergies / Dietary Conditions *

We do NOT guarantee a peanut-free environment, however we make every effort to have snacks that are nut-free. If none, please type in NA, so you can proceed to the next question.

20. Medical Conditions, Allergies, Learning Needs that need to be brought to our attention. *
(Please specify if your child requires additional adult/volunteer support, i.e. 1 to 1 for safety or assistance with learning/group activities.)

This is highly sensitive and kept confidential

21. If my child becomes sick or suffers a MINOR injury, a Certified First Aid Representative from St. Anne's may administer the following medications *

Check all that apply.

- Tylenol
 Ibuprofen
 Benadryl
 Do not administer medicine
 Other: _____

PICKUP ARRANGEMENTS

Your child's safety is priority and we ensure that everyone arrives home safely.

Grades JK to 2 : pick up time is 8:50pm from

side door entrance

Grades 3 to 5 : pick up time is 8:50pm from side door entrance

Grades 6 to 8 : pick up time is 9:00pm from

side door entrance

Grades 9 to 12 : pick up time is 9:00pm from side door entrance

22. PICKUP ARRANGEMENTS *

Please inform us how your child(ren) will be picked up from the parish:

Mark only one oval.

- Parents / Guardian will pick up
- Get a Ride with Someone Other Than Parent/Guardian
- Walk Home with a friend or take public transit (not recommended, unless otherwise confirmed by parent)
- Other: _____

23. Alternate Pick Up First and Last Name

24. Relationship to the Child

25. Phone Number (home/mobile)
(to ensure child has arrived home safely)

PARENTAL PERMISSION REQUIRED

With your blessings, our youth ministry will be fruitful...

26. PHOTOS AND VIDEOS *

I am aware that photos and videos may be taken during events and I give permission to use or publish these photos and/or videos of me or my child on St. Anne's Parish promotional material, including Facebook /social media, the St. Anne's Parish Website and other Ministry related sites.

Mark only one oval.

I Agree

I Disagree

Other: _____

27. RELEASE AND PERMISSION FORM *

As a parent/guardian, I give permission and consent for my child to attend and participate in all events organized by St. Anne's Parish and its Youth Ministry. I understand that this event may be held either at St. Anne's Parish or outside (ie: visiting the elderly, skating, walking to park, etc.). Upon further consideration of the acceptance of this registration by St. Anne's Youth Ministry team, I hereby individually, and on behalf of my child, agree to the terms of this release.

Mark only one oval.

I accept

I do not accept

Other: _____

28. RULES, REGULATIONS AND LIABILITIES *

I/my child agree to abide by the rules and regulations stated by St. Anne's Parish, all volunteers, chaperones and staff, including the stipulation that alcohol, drugs and weapons are not permitted. I understand that St Anne's Parish, all volunteers, chaperones and staff will not be liable if I/my child fail(s) to comply with regulations and that any infraction of these rules may result in immediate dismissal from the event with transportation costs at my expense.

Mark only one oval.

I accept

I do not accept

29. I hereby consent to my child's participation in the Youth Ministry Program at St. Anne's Parish and the events hosted by these youth groups. I acknowledge that we have read and understand all relevant information. *

Mark only one oval.

I accept

I do not accept

30. Date of Signed Agreement *

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Example: January 7, 2019

31. Name of Person who completed this Registration Form *
