

Quad-Parish Faith Formation Registration 2011-2012

936 9th Street Green Bay WI 54304 920-497-7042

Serving Annunciation, St. Joseph, St. Jude & St. Patrick Parishes

Emergency Authorization **Family Last Name:** _____

Parent/Guardian Name: _____

Contact Address: _____

Phone(s): _____

To: Religious Education and Youth Ministry of Annunciation, St. Joseph, St. Jude and St. Patrick: In case of an accident, serious illness or other emergency while in the Faith Formation building and if we as parents are unable to be reached, I hereby authorize the above named Religious Education and Youth Ministry Program staff and/or assistants to call our emergency contact person or the physician listed below and to follow his or her instructions for the child or children here named. If these contacts are unable to be reached, the staff may make whatever arrangements are deemed necessary.

Child's Name: _____

Child's Name: _____

Child's Name: _____

Child's Name: _____

Emergency Contact Other than Parent/Guardian:

Name: _____ Relationship to Family: _____

Phone(s): _____

Address: _____

Local Physician's Name:

Physician/Clinic Address: _____

Physician/Clinic Phone: _____

Name of Preferred Hospital: _____

Remarks or Special Instructions:

Parent/Guardian Signature: _____ **Date:** _____

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PROMOTIONAL/MEDIA RELEASE (Ref. Policy 5025)

During the 2011-2012 year, the Annunciation, St. Joseph, St. Jude and St. Patrick Religious Education and Youth Ministry may reproduce or participate in videotape, motion picture, audio recording, web posting or still photograph productions that involve the use of student's names, likenesses or voices. Such productions may be used for educational or exhibition purposes by the Religious Education and Youth Ministry Programs of Annunciation, St. Joseph, St. Jude and St. Patrick and may be copied, copyrighted, edited and distributed by these programs.

News media, including representatives of television, radio, newspapers and magazines, also may be permitted on parish property and may take notes, still photos, sound recordings and/or moving pictures that may include your child. These items may appear or be used in news or feature stories by print, television website posting or radio media.

You have the right to object to the use of your child's name, picture or voice in these productions and may do so by indicating this in the appropriate section of the form below. If you do not object, check the box below, sign, date and return this form to the director of your parish Religious Education and Youth Ministry Programs. If you have any questions, please contact the Faith Formation Office at 497-7042.

Please check one of the following choices:

I, _____ (Parent Name), the undersigned, **do not give consent** that the Annunciation, St. Joseph, St. Jude and St. Patrick Religious Education and Youth Ministry Programs use the name, portrait or other likeness of my child for news releases, media and promotional activities. This objection is made at the beginning of the 2010-2011 year. (Please sign, date and return this form)

_____ I **give my consent** to the use of my child's(ren's) name, likeness or voice in the above mentioned media. (Please sign, date and return this form)

Student's Name:

Grade:

Parent/Guardian Signature: _____

Date: _____