



PARISH REGISTRATION FORM

DAYTIME PROGRAM | MONDAY - FRIDAY,
EVENING PROGRAM | SUNDAY - THURSDAY,

STUDENT'S LAST NAME: _____

FAMILY EMAIL (checked most regularly): _____

FAMILY STREET ADDRESS: _____

CITY

STATE

ZIP CODE

PARENTS' INFO	MOTHER	FATHER
FIRST NAME		
LAST NAME		
CELL PHONE #		
EMAIL ADDRESS		

EMERGENCY CONTACT

FIRST AND LAST NAME: _____

RELATIONSHIP TO CHILD (e.g. grandparent, aunt, etc.): _____

EMERGENCY CONTACT'S CELL #: _____

YOUTH REGISTRATION	CHILD #1	CHILD #2	CHILD #3
FIRST NAME			
LAST NAME			
GENDER			
AGE			
DATE OF BIRTH			
GRADE ENTERING IN FALL '26			
HAS YOUR CHILD RECEIVED THEIR 1ST COMMUNION?			
LIST ANY ALLERGIES, MEDICAL CONDITIONS, OR SPECIAL NEEDS			

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PHOTO AND VIDEO RELEASE FOR _____

The undersigned grants full permission to use my or the said minor's likeness in any photographs, videos, or other digital media ("photo"), or any other recorded of this event for any legitimate and legal purpose in any and all of its publications, including web-based publications, without payment or other consideration. I understand that all photos become the property of the parish named above and the Archdiocese of Saint Paul and Minneapolis (ArchSPM), or anyone authorized by the forementioned parties and will not be returned. I hereby irrevocably authorize parish named above to edit, alter, copy, exhibit, publish, or distribute these photos for any legal and lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

Yes, I authorize use of my and/or my child's(ren's) images as mentioned above.

No, I do not authorize the use of my and/or my child's(ren's) images as mentioned above.

LIABILITY WAIVER

The undersigned, his/her personal representatives, heirs, and assigns, DO HEREBY CERTIFY:

- I recognize and acknowledge that there are certain risks of physical injury to individuals and I voluntarily agree to assume any and all risks or injuries, damages or loss, regardless of severity, that myself or the said minor(s) may sustain as a result associated with participating in this event, including but not limited to: falls, slipping, tripping, tipping over, and so forth, contact with others, the effects of the weather including high heat, humidity and/or cold, and the conditions of the ground, all such risks being known, understood, and voluntarily assumed by the participant.
- Having read this waiver, knowing these facts, and in consideration of your accepting my registration, I hereby, for myself and/or anyone else entitled to act on my behalf or might claim on my behalf, further agree to waive and relinquish all claims I may have (or accrue to me) as a result of myself and/or the said minor(s) participating in these activities/events against the parish named above and the Archdiocese of Saint Paul and Minneapolis (ArchSPM), any affiliates, and/or their employees, sponsors, officials, agents, and volunteers.
- I do hereby fully release and forever discharge the parish name above and the ArchSPM, and all other parties and individuals associated including their employees, volunteers, sponsors, officials, agents, police, and their representatives and successors from any and all claims for injuries, illnesses, damages, expenses, or loss that I or said minor(s) may have or which may accrue, arising out of, connected with, or in any way associated with the activity/event.
- Additionally, I agree to protect, defend, hold harmless, and fully indemnify parish named above and the ArchSPM, all affiliates and their employees, sponsors, officials, agents, and volunteers for any claim or cause of action whatsoever arising out of the activity/event that is brought against the parish named above, the ArchSPM, affiliates, and their employees, sponsors, officials, agents, and volunteers by myself, my child(ren), and family members.

With my signature, I verify that I am at least 18 years old, I am the parent or legal guardian of said minor(s), and I have read, reviewed, and fully understand the above release statements, warning and assumption of risks, and indemnification agreement, and additionally grant a waiver and release of all claims.

Signature: _____ Date: _____

VOLUNTEERS NEEDED

We rely on volunteers to help us make this program safe and available for our youth. Please note that all volunteers must be compliant with Safe Environment policies. We will help you with this, if your credentials are not up to date.

To volunteer, please check out our website at

DONATIONS NEEDED

We welcome donations of supplies, snacks and meals to help offset costs and keep our Totus Tuus program affordable for all families. Are you able to donate?

Yes, please send me more information once it is available.

Maybe, send me info and I will see if I can help at that time.

No, I am unable to donate at this time.

REGISTRATION

Grade School - Daytime Program (Entering 1 - 6 gr.)

Junior/Senior High - Evening Program (Entering 7 - 12 gr.)

Make checks payable to:

Memo: Totus Tuus

Drop off or mail registration form with payment to:

Please register by

to ensure supplies are purchased for all participants.

LINKS & INFORMATION

For more information, to volunteer, or donate snacks, meals, or supplies, please contact the parish office at