

St. Boniface Parish + CCD Registration

2024-2025

Student(s):

Grade

_____	_____
_____	_____
_____	_____
_____	_____

Parents:

Address:

Email Address:

Cell Phone:

Emergency contact person & phone number:

CCD fees: \$30.00 per student

of Children _____ X \$30.00 = Total Paid \$ _____

**Cash _____ Check # _____
(Make checks payable to St. Boniface Church)**

*****Anyone who is teaching CCD does not have to pay for their children to attend CCD.**

(Continued on the back)

******Servers Needed!** Sign your child/ren name(s) below if they are willing to be on the serving schedule this year (2024-2025). 4th Grade and older are eligible. There will be training for all servers - current and interested - with Fr. Starman on **Aug. 28th @ 6:30 p.m. in the church.**

Child/ren name(s): _____

******The Youth Choir will start practice on September 11th.** Children in grades 3rd and up are welcome to sing at the 3rd Saturday Mass every month and for special occasions. Please list your child/ren below that would like to sing in the Youth Choir.

Practice for the youth choir will be at 6:00 pm in the choir loft on the evenings there is CCD class.

******We want YOU to help us out in the classroom!** Please consider joining our CCD team of teachers and help us out by volunteering your time to help in your child/ren's class. Please write your name below if you are willing to help us out with the CCD program! It will be worth it! **You will need to be Safe Environment Trained if you'd like to help.**

Classes start on September 4, 2024

All classes will meet from 6:30-7:30 p.m.

**2ND GRADERS WILL CELEBRATE THE
SACRAMENT OF FIRST RECONCILIATION**

Date - APRIL 16, 2025

**3RD GRADERS WILL CELEBRATE THE
SACRAMENT OF FIRST HOLY COMMUNION**

Date: APRIL 26, 2025

RELEASE FORMS FOR CHILDREN

YES or NO - I give permission for my child/ren, while under the direction/care of St. Boniface Catholic Church, Stuart, Nebraska, CCD leaders, to have photos/videos/images taken, displayed, or used for record keeping, promotion, outreach, and celebratory purposes. I/we authorize church staff and teachers to photograph, video record, and use said media for church ministries.

YES or NO - I grant permission in the event my child/ren is injured or becomes ill for medical care to be administered to my child/ren and to use our personal insurance to cover such incidents. I hereby give permission to the physician selected to render medical treatment deemed necessary and appropriate by the physician.

YES or NO - In the event it comes to the attention of the archdiocesan and/or parish chaperones that my child/ren complains of illness, I grant permission for non-prescription medication (such as Tylenol, lozenges, etc.) to be given to my child/ren.

The undersigned do hereby release, forever discharge and agree to hold harmless St. Boniface Parish and the Archdiocese of Omaha from and against any and all kind of liability, claims, demands, lawsuits, and expenses of any kind arising from personal injury, sickness, death or property damage of any kind whatsoever which may be incurred or suffered by the undersigned and/or the undersigned's minor child(ren).

The undersigned further agree to indemnify and hold harmless St. Boniface Parish and the Archdiocese of Omaha and its respective members, directors and employees, teachers and sponsors from any and all liability, claim, loss, damage, cost or expense and waive any such claims against persons or organizations arising directly or indirectly from or attributable in any action or omission to act of any such person or organization in connection with the sponsorship, organization and execution of the CCD events on St. Boniface's property or at events for St. Boniface Church.

*Signature of Parent/Guardian _____ Date _____