



ST. JOHN EUDES CATHOLIC CHURCH  
FAMILY FORMATION WITH CHILDREN K-5th Grade  
TO RECEIVE THE FIRST HOLY COMMUNION  
**Registration Form 2020-2021**

**I. CHILD INFORMATION**

Child's Legal Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
*First Middle Last*  
Birthdate: \_\_\_\_\_  
 Male  Female School: \_\_\_\_\_ Grade: \_\_\_\_\_

**II. PARENTS/GUARDIANS INFORMATION**

Child live with  Both Parents  Mother  Father  Guardian (Specify): \_\_\_\_\_

Father's Legal Name: \_\_\_\_\_  
*First Middle Last*

Cell Phone: \_\_\_\_\_ Catholic?  Y  N if not, Religion: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_  
*First Middle Last*

Cell Phone: \_\_\_\_\_ Catholic?  Y  N if not, Religion: \_\_\_\_\_

Marital Status:  Civil  Married  Divorced  Single  Widower

**III. CONTACT INFORMATION**

Family Last Name: \_\_\_\_\_ Guardian's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Contact Email: \_\_\_\_\_

**IV. EMERGENCY CONSENT**

I authorize the following adults to pick up my child from class. In an emergency, if you are unable to reach me, I authorize my child to be released to their care

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

**V. SACRAMENTAL INFORMATION**

Date of Baptism\*: \_\_\_\_\_ Parish of Baptism\*: \_\_\_\_\_

**\*Required Information** : A copy of the Certificate of Baptism must be presented in order to complete the registration process.

## VI. AUTHORIZATION AND CONSENT

### **MEDICAL TREATMENT (authorized with signature below)**

As a parent or legal representative, I authorize and give my consent for my child to obtain all necessary medical and first aid treatment to preserve the life, limb, or welfare of the child in the event of a emergency.

Specify allergies, chronic illnesses, learning problems, or other problems that affect your child:

Medical Insurance: \_\_\_\_\_ Policy Holder: \_\_\_\_\_ Identification #: \_\_\_\_\_

### **IN CASE OF EMERGENCY (authorized with signature below)**

I authorize and give my consent for my child to be retained in the parish and delivered only to parents or authorized adults on the registration form.

### **PRESS RELEASES (authorized with signature below)**

I authorize and give my consent to St. John Eudes Parish to use photos/videos taken of my child during parish events in publications, videos and website.

\_\_\_\_\_  
*Parent's Signature*

\_\_\_\_\_  
*Date*

## VII. PROGRAM FEES

One child: \$50.00

Two children: \$100.00

Three or more: \$150.00

Are you registered in the parish? Yes  No

If your answer is "Yes" write down the registration number envelope # \_\_\_\_\_

If your answer is "No" the additional fee per family is \$50.00

Additional fee applies if family has not been registered for 6 months minimum.

**\*Total** \_\_\_\_\_

**\*This non-refundable payment must be paid in full with registration.**

### **OFFICE USE ONLY**

Date: \_\_\_\_\_ Amt. Paid: \_\_\_\_\_  Cash or  Check #: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Balance: \_\_\_\_\_

Date: \_\_\_\_\_ Amt. Paid: \_\_\_\_\_  Cash or  Check #: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Balance: \_\_\_\_\_

Date: \_\_\_\_\_ Amt. Paid: \_\_\_\_\_  Cash or  Check #: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Balance: \_\_\_\_\_

Date: \_\_\_\_\_ Amt. Paid: \_\_\_\_\_  Cash or  Check #: \_\_\_\_\_ Receipt #: \_\_\_\_\_ Balance: \_\_\_\_\_

Notes: \_\_\_\_\_

**Empowering God's Children and Young People©**

**Safety Program**

**“Parent’s Permission Slip”**



**TO: Parents/Guardians**  
**FROM: St. John Eudes Parish – Children and Youth Ministries - Religious Education Program**  
**SUBJECT: VIRTUS® Empowering God's Children and Young People Safety Program**  
**DATE: 2020– 2021 Cycle**

The Los Angeles Archdiocese Office of Safeguard the Children has developed a new K-12 “Empowering God’s Children and Young People”© Safety Program for schools and Religious Education Programs. This new program is designed to help children and young people to know that they have the power to protect themselves from harmful or threatening situations and to always aim to keep themselves safe and healthy. This program is an ongoing effort to help create and maintain a safe environment for children and youth to be protected from all forms of abuse.

The focus of this program is to empower children and youth with the knowledge and understanding needed to keep themselves safe.

This year we will present the Empowering God’s Children Safety Program to our students in a class lesson during the month of **January**. The topic for this year’s lesson is **Year 1: Safe and Unsafe Touching Rules**. Each lesson will include: Introductory Video “Empowering God’s Children,” “Hands-on” classroom activities, Technology Component, Take Home activity to help parents/guardians review the lesson with their child, and a “Catechetical Connection” to the Catechism of the Catholic Church to magnify God’s desire for their happiness, health and safety.

Parents/guardians seeking additional information regarding this program or who would like to review the materials/ videos, please feel free to contact **Marta Garcia at (818) 341–3680 ext. 110**.

For more information on the Empowering God’s Children Safety Program, please visit <https://lacatholics.org/empowering-gods-children/>



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**St. John Eudes Parish Religious Education Program**  
**Parent Permission Slip for the VIRTUS® Empowering God’s Children Program**

I understand that for my child to participate in the VIRTUS® *Empowering God’s Children Program* I need to fill out and return this Parent Permission Form with the Religious Education registration form. My signature below is my specific request for my child’s participation in the Empowering God’s Children Safety Program.

Minor’s Name (printed): \_\_\_\_\_

Parent’s Name (printed): \_\_\_\_\_

Parent’s Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## 2020—2021 FC REGISTRATION REQUIREMENTS

- This Registration Form, completely filled out
- Copy of Certificate of Baptism (or Birth Certificate for Unbaptized)
- Virtus – Permission Slip signed
- Program Fees—Check/Cash payable to **St. John Eudes Parish**, memo line: **First Communion 2020-21**.