

Instant Contact Information

We are working at communicating more through emails. For *informational emails* that do not require immediate attention, please indicate the email we should contact you at under "**Email Address**".

During the course of the year, we may need to inform you of a school closing or any other *immediate message*.

- For those of you who have smartphones and receive emails on the spot, *your Instant Contact information can be your email address*.
- Some of you may prefer to receive such a message via SMS (text). *If you wish to receive your immediate notification via text*, please provide your Instant Contact information as your cell phone number in email address format. The generic format for converting a cell phone number to an email address is:

your 10-digit cell phone number @ carrier's website.

For example, if your cell phone service provider is Verizon, your Instant Contact Information would be 2015551212@vtext.com. (Verizon Example)

For specific instructions on converting your cell phone number to an email address, please contact your service provider.

Church of the Annunciation

Faith Formation Program

Health Questionnaire for the 2019 – 2020 School Year

This form must be completed at the beginning of each school year. Please answer all questions.

- Does your child have any hearing concerns? (e.g. hearing aides) _____ Yes No
- Does your child have any speech concerns? (e.g. slow speech development) _____ Yes No
- Does your child have any physical concerns which might affect participation in the program? _____ Yes No
- Does your child have any emotional or behavioral needs which might affect participation in the program? If so, please explain _____ Yes No
- Does your child have any health concerns which might require emergency action while he/she is at class (e.g. seizures, diabetes, asthma, allergies) If so, explain _____ Yes No

- Does your child require an EpiPen? PLEASE READ THE POLICY REGARDING EPINEPHRINE PRE-FILLED AUTO-INJECTIONS ON THE WEBSITE OR HANDBOOK. YOU MUST COMPLETE, SIGN, AND SUBMIT THE FORM WITH YOUR REGISTRATION. Yes No

Is there anything else you wish to add that you feel is important for us to know so that we may best serve your child's needs _____

Yes No

All information is kept confidential between the parish staff, the child's catechist, and emergency personnel.

In case of accident or serious illness, I request the parish to contact me. If the parish is unable to reach me, I hereby authorize the parish to contact the following physician:

Physician's Name: _____ **Phone:** _____

and follow his/her instructions. If it is impossible to contact this physician, the parish may make any arrangements they deem necessary.

Signature of Parent/Guardian

Date

Date of Birth: _____

Sex: _____

Child's Name: _____

Grade: _____

Emergency Contact Information:

Name

Phone

Name

Phone

Instant Contact Information

Church of the Annunciation
Public Relations Release Form
2019-2020

On occasion, we may wish to photograph or videotape children in connection with our Faith Formation program and events.

I hereby authorize Church of the Annunciation to use my child's photograph or videotape in public relations materials, including but not limited to, bulletin boards, brochures, articles, advertisements in the paper and on the web site.

I understand that no personal information pertaining to the photos/videos will be published by Church of the Annunciation without specific authorization to do so.

I **do** authorize this release _____

I **do not** authorize this release _____

Child's name

Parent or guardian signature

Child's name

Child's name

Date

Please return with your Registration Form

Church of the Annunciation
Faith Formation Program
Opportunities to Share Your Time and Talent
Volunteer Form 2019 – 2020

“There are different kinds of spiritual gifts but the same Spirit; there are different forms of service but the same Lord; there are different workings but the same God who produces all of them in everyone.”

Family Name: _____ **Phone #:** _____

Stewardship is the response of a grateful heart for all the gifts bestowed on us by God. It is lovingly sharing with others the gifts and talents God has given us. **By giving each of us different gifts, God made sure that the Church would have the combination of talent and treasure that was needed to do God’s work.**

The parish and families work in collaboration with one another in order to provide an example of a lived experience of a vibrant faith-filled community. Prayerfully reflect on the many blessings bestowed on you from God, and consider the following areas to share your gifts and talents. Then please indicate where you feel called to volunteer.

Gr. K-8 Family Program	
<u>Sunday 8:45-10:30am</u>	
Catechist for Grade (list grade)	_____
Partner Catechist for Grade	_____
Substitute Catechist for Grade	_____
Catechist’s Aide Grade	_____
Photographer	_____

Gr. K-6 Family Program	
<u>Monday 6:00-8:00pm</u>	
Catechist for Grade (list grade)	_____
Partner Catechist for Grade	_____
Substitute Catechist for Grade	_____
Catechist’s Aide Grade	_____
Setup Pizza	_____
Cleanup	_____
Photographer	_____

Other: Is there a gift or talent you could share

Gr. 7-8 Weekly Monday 7:00-8:30pm	
Catechist for Grade (list grade)	_____
Partner Catechist for Grade	_____
Substitute Catechist for Grade	_____
Catechist’s Aide Grade	_____
Hall Monitor	_____

Confirmation Immediate Prep Gr. 9	
* Twice a month Monday 7:00-8:30pm	
or * Sunday 8:00-10:15am	
Catechist	_____
Partner Catechist	_____
Substitute Catechist	_____
Catechist’s Aide	_____
Hall Monitor	_____

For Grade 2 Parents:	
Arrange First Eucharist candidates pictures on a poster board for display in Gathering Space _____	

For Grade 9 Parents:	
Arrange Confirmation candidate pictures on poster board for display in Gathering Space _____	