

**ST. ATHANASIUS PARISH CHILDREN'S FAITH FORMATION
POWER WEEK REGISTRATION JULY 10 – 14, 2017 9:00 a.m. – 3:00 p.m.**

Please check label and mark corrections. If there is no label, please fill in the requested information

Student Name AND Nickname		Student Date of Birth	
Student's School		Student Grade in Fall	
Street Address	City	Zip	

VOLUNTEER: Please list any interested adult or teen.

Name (s) _____
 Will be a: () Guest Catechist () Small Group Ldr () Snack Provider () Service Project or Craft Coordinator

Catechists plan and teach, must be practicing Catholics and willing to complete Safe Environments clearance process . Catechists are needed for at least one 2-hour shift. Parish provides teaching materials. Small Group Leaders must complete clearances and are needed for full week – no teaching – need not be practicing Catholics. Those helping with snacks, service projects or crafts need clearances and are needed for at least one 2-hour shift.

Home Phone	Home E-Mail		
1 st Parent/Guardian Name & Relationship	1 st Parent/Guardian Work Phone	1 st Parent/Guardian Cell Phone	
2 nd Parent/Guardian Name & Relationship	2 nd Parent/Guardian Work Phone	2 nd Parent/Guardian Cell Phone	

Emergency Contact: *Not a parent! Should be a person we can call if Parent/Guardian Is not available.*

Name of Emergency Contact – Not a parent	Relationship	Phone(s)
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Special Needs: Is there anything we should be aware of regarding special needs (learning disabilities, physical disabilities, allergies, medications, stressful family situation, etc.) that will help catechists and staff better tend to the needs of your child? This information will be kept in confidence and we will work to provide Faith Formation that meets any special needs.

- () My child wishes to be in the small group with (you may request one student only): _____
- () Allergic to _____ How severe is the allergy? () Life-threatening-Epi-pen required () Not life-threatening
- () Special Needs, IEP, Learning Disability, Physical Disability, Medications during class times, etc.:
- () Recent difficulties (*i.e., divorce, death in family, relocation - describe*) _____

Special Agreements Regarding Power Week Summer Program – Check to indicate agreement:

- () I have read and will comply with the program
- () I understand that participants in Power Week agree to attend at least 3 Faith Formation events during the 2017-2018 year, choosing from a list of events that will be provided. In addition, attendance at one grade level **Catholic Vision of Love, Lent Reconciliation, a service project** event is required.
- Eighth graders will participate in the **Fall Confirmation Meeting and all Super Saturdays** in preparation to receive the sacrament.
- () I understand that Power Week runs from July 10 through 14, 9 AM to 3 PM and students should not be enrolled in Power Week if they know in advance that they must miss even one day, and that missing more than one day of the program may lead to a requirement for make-up work or a transfer to the weekly program.
- () I agree to provide a sack lunch for my child each day, marked with their name, and will contribute snacks or beverages if asked to do so. Refrigeration is available.
- () I understand that the program may be cancelled if there are not enough students registered.
- () I understand that volunteers are needed, and will try to get at least one adult or teen family member to free up at least ½ day or more to assist, and further understand the program may be cancelled if there are not enough volunteers.

Registration & Snacks Fee Attach check payable to *St. Athanasius Parish*.

- () Parishioner, single child: \$75.
- () Parishioner, two or more children: \$120.
- () Financial Need: *In the case of financial difficulty, please call 412-931-4624. It's OK to register now and pay later, and fees can be waived if families need assistance.*
- () Non-Parishioner Fee: () Single Child: \$110, () Two or More: \$130.00 We are parishioners at: _____.

Photo Consent

I/we, _____ (parent/guardian names), accept the agreement and grant permission for child listed above, to be photographed during class/activities. Photos may appear on parish web pages or publications without names. I/We, the undersigned parent(s)/guardian of the child listed above, a minor, do hereby authorize treatment of my/our child by a licensed medical physician or Emergency Care professional in case of any accident or illness that may so arise, or any hospitalization necessary. This medical consent will remain effective throughout the duration of Power Week. I/we agree that in case of injury to my/our child, we will apply my/our hospitalization and/or or accident insurance toward payment of the expenses incurred and will not look to St. Athanasius Parish or any other program sponsor or volunteer for the payment of any medical costs or injury related costs.

Signature of Parent/Guardian: _____ Date: _____

If your child is NEW to our programs, and was not baptized at St. A's please attach a copy of Baptism Certificate!