



Church of the Ascension
12033 Miller Ave, Saratoga, CA 95070



Faith Formation Registration 2020-2021

(Sunday School)

FAMILY INFORMATION

Home Address: _____
(number, street name, city, state, zip)

Father's Name: _____ Cell phone: _____

Email: _____

Mother's Name: _____ Cell phone: _____

Email: _____

STUDENT #1 INFORMATION

Last Name: _____ First Name: _____

Birth Date: _____ School Grade: _____

Sacrament Detail:

Baptism received: Yes/No Date received: _____

Eucharist received: Yes/No Date received: _____

Confirmation received: Yes/No Date received: _____

Special Needs: (medical, known allergies, learning disabilities, physical disabilities, etc.)

STUDENT #2 INFORMATION

Last Name: _____ First Name: _____

Birth Date: _____ School Grade: _____

Sacrament Detail:

Baptism received: Yes/No Date received: _____

Eucharist received: Yes/No Date received: _____

Confirmation received: Yes/No Date received: _____

Special Needs: (medical, known allergies, learning disabilities, physical disabilities, etc.)

Emergency Contact Information

Authorization for Emergency Medical Treatment. I hereby authorize St. Simon Parish personnel to render emergency medical treatment to my child in the event of injury or illness.

Parent Signature: _____

When I cannot be reached or notified about the illness please contact:

Primary Physician: _____ Phone Number: _____

Medical Insurance: _____ Insured's name: _____

Group Number: _____ ID Number: _____

Photography and Videotape Consent:

I hereby grant permission for my child/children to be photographed and/or videotaped during Church of the Ascension activities and events for use within the group. *Yes/No*

I hereby grant permission for my child/children to be photographed and/or videotaped during Church of the Ascension activities and events for promotional purposes, including use in the bulletin, website, and other media. *Yes/No*

Diocese of San Jose – Consent and Release Form – Virtual Media for Children and Youth:

I have read and give permission for Zoom* <https://stsimon.org/wp-content/uploads/2020/09/Virtual-Consent-pdf-1.pdf> (Content is the same, but the link will be to ascensionsaratoga.org webpage – will update this)

I do not give my child permission for Zoom usage, and will sign up for home school

Other: _____

Please submit this to the Church of the Ascension office by September 22, 2020:

1. Registration Form – completed and signed
2. Registration Fees (\$75 per child). Add \$20 for supplies, if preparing for Sacraments.
Pay online via WeShare or make checks payable to Church of the Ascension.

Please call Church of the Ascension at (408) 725-3939 ext. 102 if you have any questions.