

## Program Information

Our Children's Ministry and Middle School Youth Ministry program both meet on Sunday mornings from 9am – 10:15am in the upper level of the parish hall.

**PreK-Kindergarten:** We offer a preK/kindergarten for 4 year-olds (by April 1) & Kindergarten students.

**Grades 1 – 5:** These grade levels are featured within our classroom model. The classes are by grade level with one class per grade.



Grades 6-8 will be combined, and their gathering will follow a youth ministry format & will be known as

EDGE – Middle School Youth Group.

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## Registration Information

Enclosed you will find the registration form as well as the permission and liability release form. If you can't recall the sacramental dates, do not worry.

**Registration Fees:**       \$30/child if received on or before June 30.  
                                      \$45/child if received on or after July 1.

Please note: At no time should any registration fee prevent you or any member of your family from participating in any of our parish programs. Please contact the Parish Office if you might need financial assistance.

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## Registration Submittal Information

The registration form and fee payment can be mailed to the following address:

CCD Registration  
St. Mary of Lourdes  
424 Lourdes Church  
Germantown Hills IL 61548

If you have any questions, please contact the parish office at 309-383-4460.

# St. Mary of Lourdes CCD Registration 2024-2025

## FAMILY INFORMATION

Father's First Name \_\_\_\_\_ Father's Last Name \_\_\_\_\_

Father's Cell Phone \_\_\_\_\_ Father's Email \_\_\_\_\_

Mother's First Name \_\_\_\_\_ Mother's Last Name \_\_\_\_\_

Mother's Cell Phone \_\_\_\_\_ Mother's Email: \_\_\_\_\_

Family's Home Address \_\_\_\_\_  
STREET CITY ZIP

## CHILDREN INFORMATION

### Child #1

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last \_\_\_\_\_

Birthdate \_\_\_\_\_ Gender (circle one) Female Male

Grade Level (2024-2025) circle one Age 4 K 1 2 3 4 5 6 7 8

Special Needs (Medical, Learning/physical disabilities, etc.) \_\_\_\_\_

### Child #2

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last \_\_\_\_\_

Birthdate \_\_\_\_\_ Gender (circle one) Female Male

Grade Level (2024-2025) circle one Age 4 K 1 2 3 4 5 6 7 8

Special Needs (Medical, Learning/physical disabilities, etc.) \_\_\_\_\_

### Child #3

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last \_\_\_\_\_

Birthdate \_\_\_\_\_ Gender (circle one) Female Male

Grade Level (2024-2025) circle one Age 4 K 1 2 3 4 5 6 7 8

Special Needs (Medical, Learning/physical disabilities, etc.) \_\_\_\_\_

### Child #4

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last \_\_\_\_\_

Birthdate \_\_\_\_\_ Gender (circle one) Female Male

Grade Level (2024-2025) circle one Age 4 K 1 2 3 4 5 6 7 8

Special Needs (Medical, Learning/physical disabilities, etc.) \_\_\_\_\_



**Catholic  
Diocese of  
Peoria**



**St. Mary of Lourdes**

### **EMERGENCY CONTACT INFORMATION**

**In the event of an emergency, please list someone, other than a parent, as your emergency contact.**

**Emergency Contact #1**

**First Name** \_\_\_\_\_ **Last** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Relationship to Family** \_\_\_\_\_

**Emergency Contact #2**

**First Name** \_\_\_\_\_ **Last** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Relationship to Family** \_\_\_\_\_

### **LIABILITY WAIVERS**

**Please provide and print Full Legal Name (first, middle, last)**

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

**Father's Name:** \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_

**Child 1 Name:** \_\_\_\_\_

**Child 4 Name:** \_\_\_\_\_

**Child 2 Name:** \_\_\_\_\_

**Child 5 Name:** \_\_\_\_\_

**Child 3 Name:** \_\_\_\_\_

**Child 6 Name:** \_\_\_\_\_

### **General Permission**

I request that my child(ren) listed above be allowed to attend Children & Youth Ministry Programs located at St. Mary of Lourdes, Germantown Hills for the duration of the 2024-2025 school year. I hereby release and agree to indemnify and hold harmless the parish, its staff and their employees and agents, volunteers, and the Catholic Diocese of Peoria from any and all liability, for injuries, damages, medical expenses or any other loss to my child or family, including attorney fees, arising from claims of any kind or nature whatsoever from my child's participation in this program.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### **Videotaping and Still Photographs**

Video, still photographs and audio recordings, may be taken of my child/children during the Children & Youth Ministry Programs at St. Mary of Lourdes, Germantown Hills for the duration of the 2024-2025 school year. This authorization form constitutes permission for my child(ren)'s participation in videotaping, still photographs, and/or audio recordings, which may be used for future promotional efforts, including the Catholic Diocese of Peoria publications and websites for the duration of the 2024-2025 school year.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_