

## CHILDREN'S CHOIR REGISTRATION FORM: 2018-2019 YEAR

Please use one form per registrant; this form may be photocopied.

Child's Name: \_\_\_\_\_ Circle: Female/Male

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Child's School: \_\_\_\_\_ Grade: \_\_\_\_\_

Mother/Guardian Name: \_\_\_\_\_

Home phone: \_\_\_\_\_ Unlisted? Yes No

Cell phone/Business phone/other: \_\_\_\_\_

Email: \_\_\_\_\_

Father/Guardian Name: \_\_\_\_\_

Home phone: \_\_\_\_\_ Unlisted? Yes No

Cell phone/Business phone/other: \_\_\_\_\_

Email: \_\_\_\_\_

Does your child have any allergies? Yes No To what? \_\_\_\_\_

Does your child have any medical concerns? Yes No List: \_\_\_\_\_

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To the Parents:

Would you be available to assist at Monday rehearsals on a rotating basis? (No prior music experience necessary. Schedules for these dates will be mailed.)

Yes

No

Would you be available to assist on Sundays on a rotating basis?

Yes

No

*A note to parents: participation as a parent helper requires participation in the one-time session offered by the Diocese of Gary, **Protecting God's Children**. If you have participated in this program in the past, you do not need to repeat this program. Full information will be sent to you upon receipt of this form. Please contact the Music Office at 531-0922 with any questions or concerns you may have about this program.*

**This form is continued!**

### Child's Transportation and Carpool Authorization

Unless written permission is given, Children's Choir members will be released **only** to persons listed on this form. Below please list the name(s) and relationship(s) of authorized person(s). These people must be at least 18 years of age. The Director of Music reserves the right to ask for photo identification from **any** person. This section **must be signed** by a parent or guardian.

1) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: **Mother**

2) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: **Father**

3) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

4) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

5) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

### Consent for Photographs or Videotape of Choir Participants

I do hereby give my permission to Saint Paul Catholic Church and its employees, Music Director-designated personnel, or Music Director-approved newspaper reporters and photographers to photograph, videotape, and/or interview my child. I understand that the photographs, videotapes, or interviews will be done at the discretion of the Music Director for educational purposes or for church music promotional purposes (a parish/choir brochure, etc.).

I **DO NOT** want photographs of my child appearing in the following: (circle those that apply)

Saint Paul Church website      Saint Paul School website      Parish newsletters

Local newspapers      Parish videos

Other print publications used for publicity purposes (brochures)

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date