

OVERVIEW FOR YOUR RECORDS

WELCOME!

Thanks for your interest in Youth Ministry (YM) at St. Dominic's Catholic Church! YM is guided by our mission to be a welcoming Church for our diverse Bay Area: a center of faith, friendship, and spiritual growth. We fan the fire of faith in young Catholics, inviting all to follow Christ through service, liturgy, education, fellowship, and a life of integrity. We encourage students to participate in St. Dominic's liturgies as ushers, Eucharistic ministers, lectors, or volunteers with the young children's programs.

YOUTH MINISTRY MEETINGS

We meet the 2nd, 3rd, 4th, and 5th Sundays of the month from 4-5:15pm in the Pastoral and Education Center of St. Dominic's, and we attend the 5:30pm Mass which follows. Friends are welcome. Meetings will include food and:

- Bible studies
- Movies and discussion
- Catholic education
- Service projects
- Urban/film adventures
- Meet the pastor night
- Music and mini-retreat nights
- Game-nights (video & board games)

Periodic regional events with other parishes and schools in the Archdiocese include:

- Retreats/Lock-ins/Overnighters
- Trip to Six Flags
- Catholic Youth Rallies
- Service Trips
- Beach Bonfire
- Hikes
- Youth Mass/Concert
- Dances
- Baccalaureate Mass for student graduations

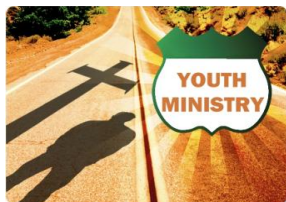
CONFIRMATION & SACRAMENTS.

Confirmation is a two-year process that meets on the first Sunday of the month from 4-5:15pm, followed by the 5:30pm Mass. Confirmation students must also attend at least 2 YM meetings per month (Catholic school students must attend at least 1 YM meeting per month). Students seeking Baptism and/or First Eucharist are invited to RCIA-for-Youth, which meets once a month on weeknights leading up to the Easter Vigil, which is April 7rd, 2012. Additional questions about sacramental preparation should be directed to Michael Smith at dre@stdominics.org or (415) 674-0446, or go to www.stdominics.org/formation/youth.

REGISTRATION

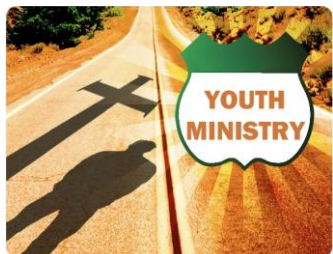
*Students and parents must complete, sign, and return the attached forms to the Director of Youth before attending any YM event. See the Calendar. **Keep this page for your records.**

* YM fees are requested as needed for special events. Confirmation costs \$110 in the 1st year, and \$150 in the second year. Make checks out to "St. Dominic's Church."



Saint Dominic's 2011-2012 Registration
Youth Ministry (YM)—Grades 7-8 & 9-12

Please separate this page from the attached registration form.
Keep this page for your records and return the registration form to St.
Dominic's.



INFORMATION SHEET

STUDENT

First name: _____ Last name: _____
 Home address: _____
 Home phone: _____ Cell phone: _____
 Email: _____ Gender (circle one): male female
 Facebook address: _____
 Date of birth: _____ Language(s) spoken: _____
 School: _____ City: _____
 Grade in 2011-12: _____

FAMILY (PARENTS/GUARDIANS)

First name: _____ Last name: _____
 Home address: _____
 Mailing address: _____
 Home phone: _____ Cell phone: _____
 Work phone: _____ Email: _____
 Marital status: _____ Relationship to student: _____
 Religion: _____ Language(s) spoken: _____

First name: _____ Last name: _____
 Home address: _____
 Mailing address: _____
 Home phone: _____ Cell phone: _____
 Work phone: _____ Email: _____
 Marital status: _____ Relationship to student: _____
 Religion: _____ Language(s) spoken: _____

Information and materials for parents/guardians should be in: (circle one) English Spanish

SACRAMENTS ALREADY RECEIVED:

Date/Church/City/State

Baptism __ Yes __ No _____
 First Reconciliation __ Yes __ No _____
 First Communion __ Yes __ No _____
 Confirmation __ Yes __ No _____

PREVIOUS RELIGIOUS EDUCATION COMPLETED—Circle grades attended:

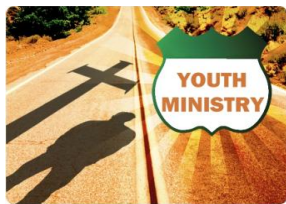
P-3 P-4 K 1 2 3 4 5 6 7 8 9 10 11

*Would the student like to prepare for Baptism? _____
 *Would the student like to prepare for First Communion? _____
 *Would you like the student to prepare for Confirmation? _____

____ Completed this Information Sheet

____ Signed Parental Permission/Involvement & Medical Emergency forms on opposite side

OFFICE USE ONLY: Date received: _____ Initials: _____



**Saint Dominic's 2011-2012 Registration
Youth Ministry (YM)—Grades 7-8 & 9-12**

***PARENTAL PERMISSION/RELEASE
AND WAIVER OF LIABILITY***

1. I/we, parent or authorized guardian of the child named above, give permission for his/her participation in **Youth Ministry and/or Confirmation** at St. Dominic's Church, and all related activities.
2. I/we agree to direct my/our child to cooperate and comply with reasonable directions and instructions from St. Dominic Parish staff and adult volunteer leaders.
3. I/we agree to be responsible for all medical expenses relating to injury of my/our child as a result of his/her participation in youth ministry, whether or not caused by the negligence of program staff or volunteers or other participants.
4. I/we understand that children participating in youth ministry may risk injury to the body or psyche or property damage to themselves and others. Such injuries can be caused by other persons, faulty equipment or facilities, or the activity itself, or be accidentally or intentionally self-inflicted.

In consideration for being permitted to participate in youth ministry at St. Dominic Parish, use the equipment provided, and enter the premises or facilities of the Archdiocese of San Francisco for any purpose including observation and participation in activities, the parent or guardian for him/herself and any successors in interest and on behalf of the minor child agrees:

1. To release, waive, discharge and promise not to sue the Archdiocese of San Francisco, its affiliated entities, and its officers, directors, employees, agents and volunteers (hereafter referred to as "Releasees") from all liability for any loss or damage, and any claim or demands therefore on account of serious or mortal injury to the body, injury to psyche or property of the minor child, or undersigned parent or guardian, whether caused by negligence or other conduct by the Releasees while the minor child, parent or guardian is participating in youth ministry or in, upon or about the premises of the Diocese or any of its facilities or equipment.
2. To indemnify and hold harmless the Releasees from any loss, liability, damage or cost it may incur due to the presence of the minor child, parent or guardian in, upon or about the premises of the Archdiocese, its facilities or equipment, or while participating in any youth ministry activities, whether caused by the negligence of the Releasees or otherwise.
3. That the parent or guardian has read this agreement, voluntarily signs the agreement and that no oral representations, statements or inducements apart from the contents of this written agreement have been made.

I have read this agreement and understand everything written above.

Parent/guardian signature: _____ Date: _____

ADDITIONAL INFORMATION (WILL BE KEPT CONFIDENTIAL)

Does your child have any special needs?

Is there any special situation or concern you would like to share with us? (Use an additional page if necessary.)

MEDICAL INFORMATION

Physician: _____ Phone: _____

Insurance: _____ Policy number: _____

Emergency contact to be notified if the parent(s) or guardian(s) cannot be reached:

Name: _____ Phone: _____

Do you authorize the adult leader to authorize medical treatment for your child in an emergency, as considered necessary by the attending physician? (Circle one) Yes No

Ongoing medication? (type and frequency) _____

Allergies to food or medication? _____

Physical or other restriction on the basis of medical condition? _____