



1	Name	(First)	(Last)	(한글)	
	Baptismal Name	(English)	(한글)	(Grade)	M / F
	세례 (Baptism)	(Yes / No)		Church Name:	
	첫영성체 (First Communion)	(Yes / No)		Church Name:	
	견진(Confirmation)	(Yes / No)		Church Name:	
	영명축일(Name's Day)			T-Shirt Size (YS, YM, YL, AS, AM, AL, AXL)	
2	Name	(First)	(Last)	(한글)	
	Baptismal Name	(English)	(한글)	(Grade)	M / F
	세례 (Baptism)	(Yes / No)		Church Name:	
	첫영성체 (First Communion)	(Yes / No)		Church Name:	
	견진(Confirmation)	(Yes / No)		Church Name:	
	영명축일(Name's Day)			T-Shirt Size (YS, YM, YL, AS, AM, AL, AXL)	
3	Name	(First)	(Last)	(한글)	
	Baptismal Name	(English)	(한글)	(Grade)	M / F
	세례 (Baptism)	(Yes / No)		Church Name:	
	첫영성체 (First Communion)	(Yes / No)		Church Name:	
	견진(Confirmation)	(Yes / No)		Church Name:	
	영명축일(Name's Day)			T-Shirt Size (YS, YM, YL, AS, AM, AL, AXL)	

Parent 1:	Name: Baptismal Name:	Parent 2:	Name: Baptismal Name:
Phone		Phone	
Email		Email	
Address			

Fees	Sunday School	Total Paid	Check #	/ Cash
	PTA	Total Paid	Check #	/ Cash

주일학교 등록비: 1명 \$30, 2명 \$50, 3명이상 \$60

Registration fee: 1 Student - \$30, 2 Students - \$50, more than 3 Students - \$60

PTA 등록비: 1명 \$30, 2명 \$50, 3명이상 \$70

PTA fee: 1 Student - \$30, 2 Students - \$50, more than 3 Students - \$70

Pay to the order of **Tri Valley Korean Catholic Church** (Please make 2 separate checks.)

위 기재 사실이 사실임을 증명합니다. I affirm that all information provided in this Student Registration Form is accurate.

Signature:

Date:

Student Name: _____

Grade: _____

Waiver Authorization

I agree on behalf of said minor, to indemnify and hold harmless the St. Paul Chong Korean Catholic Center in Tri-Valley (TVKCC), and Diocese of Oakland, and its members or agents, from any and all liability, claim, loss, damage, cost, or expense, and I waive and /or release any and all causes of action and claims against the TVKCC, and its members or agents, arising out of my child's participation in Sunday School activities, as well as traveling to and from the gathering and participation in any of the TVKCC Sunday School activities and programs.

I authorize the TVKCC Sunday School Teachers and Staff, or any adult member thereof, to supervise and direct my child's activity during any and all TVKCC Sunday School programs and activities.

I attest that my child is physically fit to participate in the Sunday School activities.

In the event my child becomes ill or injures, I do hereby consent to whatever X-ray, examination, medical or treatment and hospital care are considered necessary in the best judgment of the attending physician and performed by or under the supervision of a member of the medical staff of the hospital facility provided the treatment.

I am not aware of any medical condition which would render it inappropriate for my child to participate in any such activity.

Parents Signature _____

Date: _____

Photograph and Video Consent

From time to time, we take pictures and video of youth ministry events and gatherings. We would like to be able to use these photographs and videos for flyers, parish and diocesan publications, the ministry website and social media sites. To do this, we need both student's and the parent's consent We will not use the last names of any individual whose photos or videos are posted if there are concerns about pictures or video posted on the website, please contact the youth ministry coordinator or webmaster, and they will promptly be removed.

I/We, that parent(s) of this youth _____, authorize and give full consent, without limitation or reservation, to TVKCC to publish any photographs or videos in which the above named student and /or pictures or videos of his/her parents or videos of grandparent(s) appears while participating in any program with TVKCC ministry. There will be no compensation for use of any photographs at the time of publication or in the future.

Student Signature _____

Date: _____

Parents Signature _____

Date: _____