

The Basilica of St. Mary Star of the Sea

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Religious Education Registration Form: Name of Child _____ Grade: _____

Religious Education Registration

Child

First _____ Middle _____ Last _____ Gender: Male ___ Female ___
School Name _____ Grade _____ Birth date ____ / ____ / ____ Age _____
Street Address _____
Town/City _____ State _____ Zip code _____ Child's Home Phone _____

Parent/Guardian - Contact Information

Parent/Guardian #1

First _____ Last _____ Ms. Mrs. Mr. Other _____
Street Address _____
Town/City _____ State _____ Zip Code _____ Home Phone _____ Work Phone _____
Cell phone _____ FAX _____ E-mail _____

Parent/Guardian #2

First _____ Last _____ Ms. Mrs. Mr. Other _____
Street Address _____
Town/City _____ State _____ Zip code _____ Home Phone _____ Daytime phone _____
Cell phone _____ FAX _____ E-mail _____
Occupation _____ Employer _____
Child lives with: _____
Person responsible for payment _____

Emergency Contact Information – Alternate Pickup/Release

Emergency Contact #1

First Name _____ Last Name _____ Home Phone _____ Work Phone _____
Cell Phone _____ Email _____ Relation to child _____

Emergency Contact #2

First Name _____ Last Name _____ Home Phone _____ Work Phone _____
Cell Phone _____ Email _____ Relation to child _____

Please list those people including in addition to parents/guardians who are permitted to pick up your child:

1: _____ 2: _____ 3: _____

Sacramental Information

Has your child been baptized? Yes No

If Yes Date of Baptism ____ / ____ / ____ Church _____

Address _____

Number and Street

City/State

Country

Has your child received Holy First Communion? Yes No

If Yes Date of First Holy Communion ____ / ____ / ____

Address of Church _____

Number and Street

City/State

Country

A COPY OF BIRTH AND BAPTISMAL CERTIFICATES REQUIRED

REGISTRATION FEE:

GRADES 1,3,4,5,6,7-----	ONE STUDENT \$60.00
FIRST COMMUNION -----	ONE STUDENT \$110.00
CONFIRMATION-----	ONE STUDENT \$120.00

Terms of Agreement

I, hereby freely and voluntarily consent to participant's participation in religious education. I agree to assume all financial responsibility for participation in the activities and hold The Basilica School, Archdiocese of Miami, Inc., and all of their corporate members, affiliated entities, and employees harmless for all costs incident to participation.

I, hereby grant Sponsors full authority to take whatever actions they may consider in their sole discretion to be warranted under the circumstances concerning participant's health and safety and I specifically and fully release each of them from any liability for such decisions or actions as may be taken in connection therewith. I authorize Sponsors at their discretion to place participant, at my own expense and without further consent, in a hospital that is readily available, and to place participant in the hands of a local physician for treatment should the need arise at my expense.

I, agree to comply fully with the rules of Sponsors and I agree that Sponsors have the right to enforce their standards of conduct as determined and interpreted in their sole discretion, and that, should participant fail to comply with them, Sponsors have the right to terminate participant's participation in the program.

I, hereby grant to Sponsors the right to photograph and/or videotape participant and further to use participant's name, face, likeness, voice, and appearance in connection with exhibitions, publicity, advertising, and promotional materials without any reservation, limitation, or consideration. This waiver specifically releases any common law causes of action or claims under Fla. Stat. 540.08 and expressly constitutes written consent for publication of my name, face, likeness, voice and appearance.

I, have read the terms and conditions set forth by Sponsors and I agree that this constitutes a part of any agreement with Sponsors. I understand and agree to all of Sponsors' terms as set forth in their descriptive information and in this Release.

I certify that I am the parent or legal guardian of the above-named participant, and that I have read the foregoing release and examined the information in the description. I hereby join in each and every part of this Consent and Release (including such part as may subject me to personal financial responsibility) and hereby relinquish any claims that I may have against Sponsors as set forth above, both in my own behalf and in my capacity as legal representative (as applicable) of the participant, including without limitations any claims arising as a result of the participant's leaving the supervision of Sponsors. I agree that if any portion of this document is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Parent's/Guardian's Initials _____

Guardian Signature: _____ Date: _____

Printed Name of Parent/Guardian: _____