TVKCC Sunday School Registration Form

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

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

주일학교 등록비: 1명 \$70, 2명 \$130, 3명이상 \$180

Registration fee: 1 Student - \$70, 2 Students - \$130, more than 3 Students - \$180

PTA 등록비: 1명 \$30, 2명 \$60, 3명이상 \$90

PTA fee: 1 Student - \$30, 2 Students - \$60, more than 3 Students - \$90

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:



TVKCC Sunday School Registration Form 2024-2025

Student Name:	Grade:		
Waiver Authorization			
Oakland, and its members or agents, from any and all liability,	s the St. Paul Chong Korean Catholic Center in Tri-Valley (TVKCC), and Diocese of claim, loss, damage, cost, or expense, and I waive and /or release any and all causes ents, arising out of my child's participation in Sunday School activities, as well as the TVKCC Sunday School activities and programs.		
I authorize the TVKCC Sunday School Teachers and Staff, or an TVKCC Sunday School programs and activities.	y adult member thereof, to supervise and direct my child's activity during any and al		
I attest that my child is physically fit to participate in the Sunda	ay School activities.		
	nt to whatever X-ray, examination, medical or treatment and hospital care are aysician and performed by or under the supervision of a member of the medical staf		
I am not aware of any medical condition which would render it	t inappropriate for my child to participate in any such activity.		
Parents Signature	Date:		
Photograph and Video Consent			
photographs and videos for flyers, parish and diocesan poth student's and the parent's consent We will not use	ministry events and gatherings. We would like to be able to use these publications, the ministry website and social media sites. To do this, we need the last names of any individual whose photos or videos are posted if there site, please contact the youth ministry coordinator or webmaster, and they		
to publish any photographs or videos in which the above	authorize and give full consent, without limitation or reservation, to TVKCC named student and /or pictures or videos of his/her parents or videos of m with TVKCC ministry. There will be no compensation for use of any		
Student Signature	Date:		
Parents Signature	Date:		