

Saint Jerome Catholic Church

5550 Thornburn Street, Los Angeles, CA 90045

Date: _____

Peer Ministry Application

First and Last Name: _____ M F

Date of Birth: _____ City of Birth: _____

Home Address: _____

Email Address: _____

Phone Number: _____

Mother's/Guardian Full Name: _____

Mother's/Guardian Cell Phone: _____

Mother's/Guardian Email: _____

Father's/Guardian Full Name: _____

Father's/Guardian Cell Phone: _____

Father's/Guardian Email Address: _____

Emergency Contact: _____ Phone Number: _____

Emergency Contact (2): _____ Phone Number: _____

T-Shirt Size: _____ School: _____ Grade _____

After school activities: _____

Health Conditions/Allergies: _____

Questionnaire

1. Why would you like to be a part of the Peer Ministry Team?

2. Give your definition of what being part of a ministry team mean. What are our expectations of such a group?
3. What do you expect of yourself as part of this team?
4. Please list and describe 2 of your strengths and 2 weaknesses.
5. Briefly tell us about your current relationship with God and your Catholic faith. Has your relationship with God made a difference in your life? If so, how?
6. What St. Jerome Parish Life Teen events have you participated in so far? How has your participation affected your faith? Are there other events or retreats that you have attended not in SJP that have had an impact on your faith? Id so, how?

7. How would you like your relationship with God to change and/or grow in the coming year?
8. Tell us about your family.
9. How do you parents feel about your participation in peer ministry? Are they willing to support you and the team, and if so, in what ways?
10. Just like any other commitment, participating in Peer Ministry will take time and energy. Please list below any other activities/clubs/ministries/sports that you will be participating in next year. (Please indicate the season or semester commitment.)
11. Do you feel you can participate in the activities listed in the last question and still be fully committed to Peer Ministry? (This means that you will do everything you can to make scheduled meetings, sessions, and events.)

Parent/Guardian Authorization to use Child's image, name, voice, and/or work for non-commercial purposes

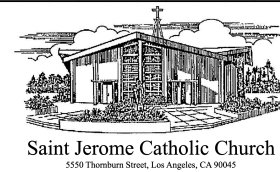
This section is to be completed by Archdiocese/School/Parish

Archdiocese/School/Parish: Saint Jerome Catholic Church

Class/Activity: Religious Education

The Archdiocese/School/Parish intends to use your child's image, name, voice, and/or work for the following non-commercial purposes (describe class/activity, date(s) if applicable): In the Bulletin or on the Website

The following person(s)/entity not connected to the Archdiocese/School/Parish will be involved in the class/activity: N/A



This section is to be completed by Parent/Guardian:

I, _____, am the parent or legal guardian of _____ (child's name), a minor (age: ____). I hereby authorize the Archdiocese/School/Parish to use the following personal information about my child:

Please initial the applicable boxes

Image/Visual Likeness: ☐ Yes
Name: ☐ Yes

☐ No
☐ No

Voice: ☐ Yes
Work: ☐ Yes

☐ No
☐ No

I understand and agree that my child's image, name, voice, and/or work (the "Personal Information") will be used for the particular reasons identified above. I further understand and agree that the Archdiocese/School/Parish may use the Personal Information for other non-commercial purposes, including, but not limited to, publicity, exhibits, electronic media broadcasts or research. I understand and agree that the Personal Information, photographs, or electronic recordings of my child may be copied, edited, and distributed by the Archdiocese/School/Parish in publications, catalogues, brochures, books, magazines, exhibits, films, videotapes, CDs, DVDs, email messages, websites, or any other form now known or later developed (the "Materials"). The Archdiocese/School/Parish may use the Personal Information at its sole discretion, with or without my child's name or with a fictitious name, and with accurate or fictitious biographical material. The Archdiocese/School/Parish will not use the Personal Information for improper purposes or in a manner inconsistent with the teachings of the Roman Catholic Church. I waive any right to inspect or approve any Materials that may be created using the Personal Information now and in the future. While the Archdiocese/School/Parish will take care to maintain the particular intents and purposes of the photographs or electronic recordings, editing may be necessary to obtain the best results. I release and discharge the Archdiocese/School/Parish and its employees and agents from any liability that may arise out of the making or editing of the photographs or electronic recordings, including but not limited to, distortion, blurring, alteration, optical, or auditory illusion or use in a composite form. In exchange for the Archdiocese/School/Parish's giving my child an opportunity to participate in the class/activity, I hereby agree that neither I, nor my child, will receive monetary compensation, royalties, or credit for use of the photographs or electronic recordings by the Archdiocese/School/Parish. I understand and agree that the Archdiocese/School/Parish shall be the owner of all right, title and interest, including copyright, in the photographs, electronic recordings and Materials. If the Archdiocese/School/Parish intends to use the Materials for a commercial purpose, I will be provided at the time with information about the terms of the commercial use.

I hereby waive, release, and forever discharge any and all claims, demands, or causes of action against the Archdiocese/School/Parish and its employees, agents, contractors, and any other person, organization, or entity assisting them with the photography, electronic recording or Materials, for damages or injuries in any way related to, or arising from the photography, electronic recording or Materials, or the use of the Personal Information, and I expressly assume the risk of any resulting injury or damage. I further understand and agree that this Authorization remains in effect until it is withdrawn in writing. I understand that if I change my mind about this Authorization, that I will submit another, new authorization form to the Archdiocese/School/Parish. However, my new authorization will not have the effect of revoking this Authorization, and the Archdiocese/School/Parish will have no duty or obligation to make any changes or alterations to any Materials that may have been prepared based on this Authorization.

I represent that I have read this Authorization, understand the contents, and am able to grant the rights and waivers it contains. I understand that the terms of this Authorization are contractual and not mere recitals. I am signing this document freely and voluntarily.

Signature: _____ Date: _____

Print Name: _____ Relationship to Child: _____

Address: _____ Telephone: _____