

2026-2027 HOUSEHOLD REGISTRATION FORM



Please complete this form and return it to the parish office.

HOUSEHOLD LAST NAME: _____

Please check one of the items below:

- ☐ **Our household is new to GIFT this year** (please fill out entire form below)
- ☐ **Our household is returning from last year and no information has changed** (ages and grades will automatically be increased. **New this year** – we have added space for email/cell phone info for a second adult. Please fill out if you both would like to receive info regarding GIFT.
- ☐ **Our household is returning from last year but please see updated information added below** (only updated information needs to be filled in) **New this year** – we have added space for email/cell phone info for a second adult. Please fill out if you both would like to receive info regarding GIFT.

Members who will be participating in GIFT: **(Please print legibly)**

Name (Adult #1) _____ **Email** _____

Cell phone _____ ☐ Check here if we can text to this number

Name (Adult #2) _____ **Email** _____

Cell phone _____ ☐ Check here if we can text to this number

Children:

Name _____ Age _____ Grade 2026/27 _____

School _____

Name _____ Age _____ Grade 2026/27 _____

School _____

Name _____ Age _____ Grade 2026/27 _____

School _____

Name _____ Age _____ Grade 2026/27 _____

School _____

Address _____

City _____ State _____ Zip _____

Home Phone (if applicable): _____

In case of emergency, call: Name _____ Telephone: _____

☆☆☆If parents/guardians are at different addresses and both request information,
please indicate second address:

Name: _____ Religion: _____

Address _____ City _____ Zip _____

Home phone: _____ Cell #: _____ Email: _____

☐ **Photo Release**

By checking this box, I give my permission for Our Lady of Lourdes Parish to use any still photographs, video recordings, or audio recordings in which members of my household may appear. I understand that these materials may be used for parish-related purposes, including but not limited to promotion, evangelization, recruitment, fundraising, and communication efforts, both online and in print. I acknowledge that these images and recordings may be used without compensation, and I waive any rights of inspection or approval. I release Our Lady of Lourdes Parish, its staff, and volunteers from any claims related to the use of these materials. I understand that their use does not constitute an invasion of privacy, and neither I nor anyone acting on my behalf will object to the parish's use of such images or recordings.

**GIFT
SESSIONS**

Our GIFT sessions this year will be held on:

(12) SUNDAYS, from 9:00 am-10:20 am

(1) SATURDAY(Service) November 14 1:00 pm – 3:30 pm

(1) SATURDAY(Service) April 24 9:00 am – 12:00 pm

Please note the last Sunday, May 2 will be a full meal and timing is TBD.

**GIFT
FEES**

SEASON PASS (Good for all 14 Sessions PLUS SNACKS!)

Due to rising costs and additional sessions, GIFT fees have increased. However, a generous donation has offset the increase this year.

	2026-2027 fee	You pay (2026-27)	Household Size
☐	\$130	\$120	Household with 1-2 Adults
☐	\$220	\$200	Household with 1 child (K4-Gr. 11)
☐	\$310	\$280	Household with 2 children (K4-Gr. 11)
☐	\$390	\$360	Household with 3 children (K4-Gr. 11)
☐	\$480	\$440	Household with 4 or more children (K4-Gr. 11)
☐	\$110	\$100	Senior Household with 1-2 adults (65 years and older)

*** NO FEE for children age 3 and under ***

☆☆☆The GIFT fees include all program/sacrament materials, snacks, and expenses including Donut Sundays and other celebrations. New GIFT participants will receive one Bible for the household.

Please make checks payable to **Our Lady of Lourdes** and remit to the Parish Office.

One-time payments are due **Sunday, September 6, 2026.**

The final installment of any payment plan is due **Sunday, May 2, 2027.**

Choose one of the following payment methods:

- ☐ Fee paid in full with registration
- ☐ Cash or Check payments throughout the year
- ☐ WeShare online payment (see ololmke.weshareonline.org)

Special Needs/Medications/Allergies – Please indicate for any/all participants:
