



Registration form

Please complete this form and **return it by August 6th 2021**

Name of Child _____

Address _____

Birthdate _____ Last school grade completed _____

Medical concerns/ allergies _____

Name of parent / primary caregiver _____

Primary phone _____ Secondary phone _____

Emergency Contact _____ Emergency Phone _____

Parent /Guardian signature _____ Date _____

Thank you for giving us the opportunity to teach your Child (ren) more about God and give them the opportunity to have fun at the same time that they learn!

____ I give permission for my child/children's photograph (no names) to be used on Parish website and/or local newspaper articles and bulletins.

____ I do NOT give permission for my child/children's photograph to be used on Parish website and/or local newspaper articles and bulletins.

Parent /Guardian signature _____ Date _____