

**Our Lady of Mercy Maronite Church**  
**First Holy Communion Class Registration Form**  
**for the 2024-2025 School Year**

Dear Parents:

We welcome you and your children to the 2024/2025 Catechetical Year. Our objective is to teach your children about our Maronite Heritages and the Catholic Faith, and make them feel welcome and comfortable in our church as they continue their spiritual path to a lifetime at Our Lady of Mercy Maronite Church.

**Below are a few key points regarding our program this year:**

- ☐ Religious Education classes will begin on Sunday, September 15, 2024 at 9:00 am.
- ☐ All students will proceed from class to Mass.
- ☐ All families and children are expected to attend the Holy Mass.
- ☐ All families must be registered parishioners and contributing members of Our Lady of Mercy Maronite Church and in good standing.
- ☐ Strict attendance for SACRAMENT classes with no more than 3 absences.
- ☐ Kindly inform your child's teacher if he or she will be absent from class.
- ☐ Children showing any signs of sickness, fever, coughs should remain home.
- ☐ In the event of inclement weather, you will receive a text and/or email from the Religious Education Coordinator.
- ☐ Medical Form should be completed for each student.
- ☐ Each family is required to sign up and provide Coffee Hour once during the year.

**We look forward to seeing you in September! Please call us with any concerns or questions.**

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Name of Child: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Grade (entering in the fall of 2024): \_\_\_\_\_

School: \_\_\_\_\_

Baptism location: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

Name of Parent(s): \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Does your child have any allergies or Medical conditions? If yes, please list them:

Child's Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Medical conditions: \_\_\_\_\_

Medical Allergies: \_\_\_\_\_

Is an Inhaler/EpiPen required for your child's medical allergies? Yes \_\_\_\_\_

No \_\_\_\_\_

(if it is, please provide it along with the doctor's prescription) If there are any other concerns you wish to discuss with your child's teachers, please mention them here.

Please return this form to Rev. Peter Frangie ASAP.