

**OUR LADY OF THE SNOW RELIGIOUS EDUCATION
REGISTRATION FORM FOR 2020-21**

FOR OFFICE USE ONLY:

OF CHILDREN ___ FEE PAID ___ CHECK # _____ CASH ___ PARISH # _____

FEEs: One Child \$110 Two Children \$160 Three or more Children \$175
Child(ren) entering Level 2 Add \$50 each
Child(ren) entering Level 9 Add \$75 each

SEND MAIL TO:

(TITLE; Mr., Mrs. Ms) (First Names) (Family Name)

(Street Address) (Town) (Zip Code)

PHONE #s _____
(cell or land) (cell or land)

Family EMail _____ (please print clearly)

FATHER _____
(First Name) (Last Name) (Religion)

MOTHER _____
(First Name) (Maiden Name) (Religion)
(Needed for sacrament registry)

MARITAL STATUS Church or place of Marriage ceremony

ADDRESS AND PHONE # OF PARENT NOT LIVING AT THE ABOVE ADDRESS

INFORMATION FOR EACH INDIVIDUAL CHILD IN LEVELS 1 - 9 CONFIRMATION

1.	_____ CHILD'S NAME	_____ LEVEL FOR 2020/21	_____ Birth Date
2.	_____ CHILD'S NAME	_____ LEVEL FOR 2020/21	_____ Birth Date
3.	_____ CHILD'S NAME	_____ LEVEL FOR 2020/21	_____ Birth Date
4.	_____ CHILD'S NAME	_____ LEVEL FOR 2020/21	_____ Birth Date
5.	_____ CHILD'S NAME	_____ LEVEL FOR 2020/21	_____ Birth Date

NEW STUDENTS - If any of the students listed above are new to the program please include a copy of their Baptismal Certificate and transcript of Religious classes attended in other parishes.

PLEASE COMPLETE ONE FORM FOR EACH CHILD (including home study)

Child's Information Form for Office and Catechist

Family Name _____ Child's Name _____ Male _____ Female _____

Religious Education Grade Level 2020/21 _____

Who was your child's catechist last year? 2020/21 _____

School Grade _____ Name of School (public of private) _____
(2020/21)

Would you be willing to:

Teach/Co-Teach?	Yes _____	More Info _____
Substitute?	Yes _____	More Info _____
Door Monitor?	Yes _____	More Info _____

Please indicate any special health concerns for this child. _____

Allergies _____ Does this require an EpiPen _____

Please indicate any special learning needs and a description of the primary diagnosis so that we can find the best class placement for them. _____

Additional Comments _____

To ensure the safety of the children I agree to walk my child into the building and come into the building to pick my child up.

Parent/Guardian Signature _____

Photo/Video Permission and Release Form

I hereby grant permission, without reservation, to the Our Lady of Snow Religious Education Program, and to those authorized by the Our Lady of the Snow Religious Education Program, to take photographs and make recordings of my child named above, and to use them in original or modified form in all media now or hereafter known, (including without limitation, websites, bulletins, newsletters, promotional brochures) with or without name or information, solely for the promotion, public education and/or informational purposes of the Our Lady of the Snow Religious Education Program.

I understand and agree that I am entitled to receive no compensation for the above.

I further agree that the Our Lady of the Snow Religious Education Program will be the sole owner of all tangible and intangible rights in the abovementioned photographs and recordings, with full power of disposition.

I am the parent or guardian of the minor named above, and I hereby consent to the forgoing on behalf of the minor and myself.

Print My Name _____

My Signature _____ Date _____

If you **DO NOT** give your permission, please sign here _____