OUR LADY OF LOURDES CHURCH Parish School of Religion - Religious Education Program Registration Form 2020-2021

Please check one:		
New		

Family Name:				Home Phone #			
Mailing Address:			Town:	_ Town: Zip Code:			
Father's Name:		Email:	Email:				
Cell Phone #				Work Telephone #			
Mother's Name:		Maiden	Maiden Name:				
Mother's Email:				Work Telephone #			
Cell Phone #							
Please circle: Child/Children reside(s) with: Both parents Mother Father Guardian							
Family Information: Single Parent Parent(s) Deceased Parents Separated/Divorced							
Student's Last Name	Student's First Name	Years of Rel. Ed.	Birth Date	Check Sacraments I Baptism Penance	Received Eucharist	Grade Entering Sept. 2020	

Parish Collection Envelope # (required):

<u>Please complete the following if your child has special needs:</u>
This important information helps the Catechist work on meeting your child's specific needs.

Child's Name	Grade	ADD/ ADHD	Special Services: IEP, Resource Room, In-Class Support	Medication/ Food Allergy	Medical Condition/Other Please explain
Additional explanation:					
Emergency Contact Infor	nation (Be	st person	to reach during Religiou	us Education hours.)	
1. Name		Phone			Relation to Child
	Phone				
Name of Authorized Peo	ple to pick	-up your	Child/children other	r than parent/s. Pl	ease state the relationship to child/children
*To make a Fee Will Offerin -A copy of the student's Bap attached for all <u>new</u> students -If entering a grade other tha	g write a chotismal recose entering grant first, proopendent Reg	eck payab rd must be rade three f of attend istered Pa	ole to: Our Lady of Lou e attached for <u>new</u> stude e and up. lance at another parish's arishioners not attache	rdes Church or on-li ents. A copy of the st s program is <u>required</u> d to parents or other	family registered parishioners.
Parent/Guardian Signatur	e:				Date

Additional Family Information

Court Documents in the Case of Guardianship or Parents Separated /Divorced Must Accompany Your Form and Must be kept <u>Current To Protect your child/children</u>

	Additional Parent Contact infor	rmation
Name	Phone	Email
WHO IS NOT ALLOWED TO PICKUP Y	OUR CHILD/CHILDREN PLEASE LI	ST THEIR NAME(s) AND EXPLAINATION BELOW
	PARENT AGREEMENT	
I/We recognize our involvement as a p	parent/guardian is of primary import faith filled life. Therefore	tance in helping to prepare our child/children for a
made at our child's/children's B		sh School of Religion to fulfill the commitment I/W ftraining our child/children in the practice of the faith." Aren up in the practice of the faith."
I/We AGREE to attend Mass wi	th our child/children every Sunday o	or Saturday (evening) and on all Holy Days.
I/We AGREE to work with our child/cl	hildren each week on assigned less	sons and to submit all assignments as scheduled.
Signature/s		
I/We give my give permission for	Our Lady of Lourdes to post my ch	ild's/children's picture on the parish website
Signature/s		
I/We have reviewed the Parent/Stude	ent Handbook which is posted on O	LOL's Parish website at: www.ololchurchnj.org
Signature/s_		

FOR OFFICE USE ONLY				
Total Due:	\$			
Amount Paid:	\$			
Cash	Check Check #			