

SACRAMENTAL PREPARATION YEAR ONE REGISTRATION FORM

9/14/2019

CHILD'S NAME _____
Last First Middle

SCHOOL _____ GRADE _____

PARENT/GUARDIAN NAME _____

ADDRESS _____
Zip Code

EMAIL ADDRESS _____

PRIMARY PHONE# _____

SECONDARY PHONE# _____

PARENT/GUARDIAN NAME _____

ADDRESS *(if different)* _____
Zip Code

EMAIL ADDRESS _____

PRIMARY PHONE# _____

SECONDARY PHONE# _____

**Materials Fee is \$25 (financial assistance available).
Please make check out to OLG.**

Office Use Only

Date Payment Received _____
Amount _____
Check # _____