

Name \_\_\_\_\_

Student Name(s) \_\_\_\_\_

## 2021-2022 Holy Rosary Faith Formation Parent Agreement

Please Initial – Both Parent and Student

\_\_\_\_\_ I understand that my student is only allowed to miss two classes this year.

\_\_\_\_\_ If my child suffers from a severe or special needs illness where he/she has to miss more than two classes, it is my responsibility to send a letter/email with an explanation of the situation to the Faith Formation office.

\_\_\_\_\_ [**ELEMENTARY ONLY**] I understand that for the safety of my child, I need to drop him/her in the classroom and initial my name at drop-off and pick-up time.

\_\_\_\_\_ I understand that for the safety of my child, and the children enrolled in Faith Formation at Holy Rosary, that I MUST complete CMGConnect Safe Environment Training ([www.cmgconnect.com](http://www.cmgconnect.com)).

\_\_\_\_\_ I understand that Faith Formation office will NOT administer any prescribed medication to my child during our Sunday classes OR Wednesday classes.

\_\_\_\_\_ I understand that Sacrament Preparation is not a stand-alone program but is an additional program ON TOP OF ongoing faith formation with additional fees.

\_\_\_\_\_ I understand that cellphone use is not permitted during class and will be taken up by catechists if issued multiple warnings.

\_\_\_\_\_ I understand and agree to abide by all the guidelines listed in this Handbook. This **includes** the classroom rules set by each individual catechist.

\_\_\_\_\_ [**HIGH SCHOOL ONLY**] I understand that as part of my Faith Formation Service Hours this year, I will participate in Elementary Faith Formation as a Sunday Morning Teacher's Aide per the schedule provided.