

ST. BERNADETTE NURSERY PROGRAM 3 MONTHS-2 ½ YRS

DATE: _____

CHILD'S NAME: _____ AGE: _____

BIRTHDAY: _____ PHONE: _____

ADDRESS: _____

EMAIL: _____ ALLERGIES: _____

PARENT/GUARDIAN: _____

Would you like to volunteer in the nursery? Please sign up for the Mass (Sunday 8:15 am or 11 am) that you can help once a month. You must have **Virtus** to volunteer with children.

HAVE YOU TAKEN THE FREE **VIRTUS** PROGRAM? Yes _____ No _____

VOLUNTEER SUNDAY MASS: 8:15 AM _____ 11 AM _____