

Blessed Trinity Parish Faith Formation Registration 2020-21 - Returning Student

Choose one:

Home study - you watch 3 pre-recorded lessons/month with your child at your convenience and go deeper into the lesson with your child in the provided textbook. You will be asked to do several simple family activities a month and send in pictures or write about your experiences.

Home study - you teach your child at home chapter by chapter with the provided books/materials. You will be asked to do several simple family activities a month and send in pictures or write about your experiences.

Child's first & last name

1. Male Female Grade _____ Date of birth _____

2. Male Female Grade _____ Date of birth _____

3. Male Female Grade _____ Date of birth _____

Child/ren's home phone _____ Mother's cell _____ Father's cell _____

Family information Any mail will be sent to the child's home address listed here

Child/ren's address _____ Zip _____

Mother's name _____ (Maiden)

Address (if different than child) _____

Father's name _____

Address (if different from child's) _____

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**Emergency contact:** *(parent will be contacted first)* NAME (other than parent)

Phone/s \_\_\_\_\_ Relationship to child \_\_\_\_\_

**Parent/s E-MAIL** address/es will only be used for Faith Formation communication purposes

**Important medical information (medical conditions, allergies etc. )**

Child's name \_\_\_\_\_ Medical information \_\_\_\_\_

Child's name \_\_\_\_\_ Medical Information \_\_\_\_\_

**Information about child's learning needs/style necessary for their teacher to know**

Child's name \_\_\_\_\_ information \_\_\_\_\_

Child's name \_\_\_\_\_ information \_\_\_\_\_

Child's name \_\_\_\_\_ information \_\_\_\_\_

Photo Release Please mark one \_\_\_\_\_ I DO \_\_\_\_\_ I DO NOT give permission for my child's photo to be taken and possibly used for the bulletin, website, parish Facebook page, etc. of Faith Formation events.

**Parent signature:** \_\_\_\_\_ **Date** \_\_\_\_\_