



Religious Education Student Registration 2020 – 2021

Please complete this for the 2020-2021 School Year. Payment is due at the time of registration.
The cost for religious education classes will be \$25 for one child and \$5 for each additional child.

Student Information

Student Name: _____
Last First Middle

Grade Level: _____ Date of Birth: _____

Confirmation begins in 9th grade or later and is a 2 year process. 1st Communion and Reconciliation occurs in 2nd grade or later.

Student Sacramental Information:

___ My child has NOT been baptized in a Catholic Church

___ My child was baptized in a Catholic Church _____

___ My child has made their 1st Reconciliation _____ Church of Baptism

___ My child has received their 1st Communion _____ Church of 1st Communion

Does this student have any special physical, mental, or medical needs, including allergies, that may affect his/her participation in the Religious Education Program?

Family Contact Information

Are you and your family registered members of Our Lady of Sorrows? YES NO

Home Address: _____
Street Address Appt. Number

_____ City State Zip Code

Mother's Name: _____

Mother's Phone Number: _____ Mother's email: _____

Father's Name: _____

Father's Phone Number: _____ Father's email: _____

Emergency Contact (optional)

List a person other than the parents/guardians listed above. In case of emergency we will reach out to the parents/guardians first. If no emergency contact is listed and the parents cannot be reached, we will use our best judgment in an emergency.

Name: _____

Relation to Student: _____ Phone number: _____

Parent Permission

Our Lady of Sorrows is dedicated to preventing the transmission of COVID-19. We are following CDC guidelines for sanitation, social distancing and face coverings. Even with these precautions, infections are still possible and may result in serious illness or even death. If you have concerns about your child’s safety or your child or someone in your household is in a vulnerable population, you may opt to have your child participate in religious education/youth group on-line or by correspondence. If you have questions about whether your child or a family member are in a vulnerable population, please visit the CDC website:

<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/other-at-riskpopulations.html>

As the parent/guardian of the students listed on this card, I hereby grant permission for my child(ren) to participate in religious education activities at OLS. I also grant permission to photograph, videotape or record my child for promotion of OLS events. In case of illness or injury I give permission for the appropriate personnel to obtain medical care for my child(ren).

Parent Signature

Date

Would you like to be part of our Faith Formation Team?

_____ YES

_____ NO

Office Use Only:

Payment: _____ Cash/Check: _____ Receipt: _____