



Our Lady of the Presentation Parish
Catechesis of the Good Shepherd
Ages 3 ½ -6
2019-2020



Level I: Ages 3 ½ - 6

Tuesday Mornings 10:00-11:00 a.m.

*(Please **PRINT** the information on this form. Thanks!)*

Parents _____ Phone _____
 Address _____ Cell Phone _____
 City, Zip Code _____ Work Phone _____
 Email addresses _____

We are members of Our Lady of the Presentation Yes ___ If no, we are members of _____

In case of an emergency, *contact* _____
 Relationship _____ Phone Number _____

Name of Child _____ Male/Female
 Age _____ Birthdate _____ (Must be 3½ years old by Sept 1, 2019)

Has your child been baptized? _____
 If not, would you like to talk to someone about baptism for your child? _____
All children must be self-sufficient in personal hygiene needs.
If less than 5 register, the session will be cancelled.

Name of Child _____ Male/Female
 Age _____ Birthdate _____ (Must be 3½ years old by Sept 1, 2019)

Has your child been baptized? _____
 If not, would you like to talk to someone about baptism for your child? _____
All children must be self-sufficient in personal hygiene needs.
If less than 5 register, the session will be cancelled.

FAITH FORMATION FEES

Make check payable to: **Our Lady of the Presentation**

Multiple child discount includes all of our programs for children.

- ___ 1 child - \$55
- ___ 2 children - \$100
- ___ 3 or more children - \$130

TOTAL FAMILY FEE

Circle other programs family members attend: Sunday School. CFF

*Please let us know if this is a financial hardship.
 No one is turned away because of inability to pay.
 Scholarships are available.*

Registration Checklist:

- Registration Form Completely Filled Out (**Front and Back**)
- Volunteer Opportunity Page Completed

OFFICE USE ONLY

Date: _____ Amount: _____ Check # _____ Cash: _____ Paid Online: _____ Verified: _____ Scholarship: _____

Family Profile- for ALL families to consider

The following information will be treated as confidential.

1. *Is there anything that would be helpful to know about your child or your family (illness/death in the family, single parent, different religious beliefs, areas of difficulty for the child such as trouble reading, areas of self-consciousness, allergies, etc?) If the information is about a specific child please specify which child has the need.*

2. *Does your child have any special needs such as physical impairments, cognitive impairments, ADD, ADHD, learning disabilities, vision impairments, hearing impairments, medical or behavioral conditions? If so please give name of child and details.*

**Parental Consent Form for Reproduction and Distribution
of Child's Writing and/or Artwork**

I hereby give permission for Our Lady of the Presentation to submit my child's writing and/or artwork to the national office of Catechesis of the Good Shepherd, Inc (CGS). for its annual journal. I understand that my child's first name, age and the location of his or her atrium will be used to identify my child's work. I also understand that a limited amount of background information provided by the catechist - e.g. presentations recently seen in the atrium or my child's comments about the work - may be printed in connection with the publication of my child's work.

I understand that the national office of CGS shall be the owner of copyright as to its annual journal, and agree that CGS shall have final editorial control over any and all material used in its annual journal, and that all proceeds derived from the distribution of the annual journal shall be the sole property of CGS.

I understand that I shall receive one (1) complimentary copy of the annual journal in which my child's work appears. I agree that if my child's work is not used in this year's annual journal, it may remain on file with CGS for possible use at a future time.

I have read this consent form before signing below, and am fully aware of its contents.

Parent/Guardian signature _____ Date _____

Parent/Guardian Consent for Photos and Recordings

_____ I hereby grant permission for this/these child(ren) to be included in the photographs, videos and other recordings taken at Our Lady of the Presentation Catechesis of the Good Shepherd Program and/or the Catholic Diocese of Kansas City – St. Joseph for the period of one year (August 2019-August 2020).

_____ I do **not** grant permission for this/these child(ren) to be included in any photographs, videos and other recordings for a period of August 2019-August 2020

Parent/Guardian signature _____ Date _____