

Religious Education Registration: 2018-2019

Our Lady of the Snow Church

www.GrandCatholic.com

Please bring or mail completed form to the office at OLS before classes begin. First class will be Sept. 6.

Please print all information, except for your signature at the bottom

Parents' Names (Nombre de los padres)	Phone Number (Numero de Teléfono)	Text Number (Numero de Texto)	Email Address (Correo Electrónico)	Mailing Address (Dirección Postal)	Physical Address (Dirección Física)

Please circle the preferred contact method. (Favor de circular el método preferido de contacto.)

Emergency Contact _____
 (Contacto de Emergencia) Name/Nombre Phone/Teléfono Email/Correo Electrónico

Child's Full Name (Nombre Completo)	Age (Años)	Grade (Grado)	Birthdate (Nacimiento)	Allergies/Special Instructions (Alergias/Instrucciones Especiales)	B	HC	C

Check ✓ the Sacraments that your child has received.
 Star * the Sacraments your child wishes to receive this year.

B = Baptism/Bautismo

HC = Holy Communion/
 Santa Comunión

C = Confirmation/Confirmación

I understand that I am the primary educator of my child in the Catholic faith. I will do all I can to support the religious education program, including having my child attend classes on a regular basis and complete all assignments.

Entiendo que soy el educador primario de mi hijo en la fe Católica. Haré todo lo que pueda para apoyar el programa de educación religiosa, incluyendo mi hijo asistir a clases regularmente y completar todas las tareas.

Signature of parent or guardian _____ Date _____

Donation (\$20 per child) Paid _____