

Information - 2nd child

First and Last Name _____

Birth Date _____ Name of school _____
MM DD YYYY

Is this child baptized? Yes _____ No _____

Grade as of this September ____ Does this child have any food allergies? Yes ____ No ____

If yes, please list allergies _____

Does your child need assistance with toileting? Yes ____ No ____

If yes, do the catechist(s) have your permission to assist the child with toileting? Yes ____ No ____

Does your child have any other special needs we should know about? _____

Consent

I give permission for the information on this form be made available to adults who will be working with my child in the atrium.

Yes ____ No ____

I give permission for my child(ren)'s photo to be taken while in the Holy Rosary Parish Atrium. These images may be used for display purposes, newsletters, presentations and /or the parish website, the National Associations of the Catechesis of the Good Shepherd website and newsletters. No names will be used.

Yes ____ No ____

Payment

Please write a cheque for **\$85 per child** payable to Holy Rosary Parish and in the memo mark "Good Shepherd Registration". Place in an envelope **attn: Janina Piva** and drop it off at the parish office. Registration will be accepted on a first come first served basis. If we are not able to accommodate your choices, your cheque will be returned. Registration fees are non- refundable once classes begin.

Date: _____ Signature of parent/guardian _____

For more information, visit

holyrosgaryuelph.ca>Ministries>Religious Education or www.cgsac.ca

Questions?

Janina Piva, Youth Coordinator, 518-822-4701 ext.#23, jpiva@hamiltondiocese.com

Office Use Only

Cheque # _____ Cash _____ Date received _____