

**2018-2019
Faith Formation**



**Young Disciples
Our Lady of the Rosary**

**Age 4-5th Grade
Classroom Program**

FAMILY Last Name: _____ Today's Date: _____

- I am a registered member of OLOR I would like to register as a member
 I am a registered member of _____ (Name of Parish)

Father's Name: _____ Mother's Name: _____

Father's Email: _____ Mother's Email: _____

Father's Cell: _____ Mother's Cell: _____

Father's Religion: _____ Mother's Religion: _____

Home Phone: _____ Home Address: _____

Parents Marital Status: Married Separated Divorced Remarried Single Widow

Child lives with: Both Parents Father Mother Guardian: _____

I am also registering other siblings for: Catechesis of the Good Shepherd First Communion
Edge Life Teen Confirmation

Please list emergency contact information and those authorized to pick up child(ren)

Name: _____ Name: _____

Relationship _____ Relationship _____

Cell Phone _____ Cell Phone _____

The First & Most Important Teachers of the Faith

As a parent, I acknowledge the awesome privilege and responsibility I have to pass on the Catholic faith to my child. I will share and model my relationship with Jesus with my child by praying daily with my child, bringing my child to Mass every Sunday, participating regularly in the weekly program for which my child is registered, and by serving others.

By registering my child, I acknowledge that I have read the Parent Handbook and agree to all that it contains. If I'm not able to access the handbook or have questions about Safe Environment, photo release, or any other policy, I will communicate with the Children's Ministry office.

Father's Signature _____ Mother's Signature _____

Registration Fees:

\$70 One Child/Youth \$30 Sacramental Program Fee (per child)
\$100 Two children or more **(Additional form required for First Communion)**

Payment Options

Visit www.ladyrosary.org/give and click on **Children & Teens**
Or make checks payable to Our Lady of the Rosary

All are welcome! We are happy to help any family with a partial or full scholarship.

Child's Name _____ Birthdate _____ Grade for 2018-2019: _____

Looking for Catechesis of the Good Shepherd (ages 3 to 6)? Please use the CGS registration form.

Choose one session from below:

Male Female

- ___ Sunday 11:00 a.m. (Pre-K4, K, 1, 2, 3, 4, 5)
- ___ Monday 4:45 p.m. (K, 1, 2, 3, 4, 5)
- ___ Monday 6:30 p.m. (1, 2, 3, 4, 5, Special Needs)
- ___ Wednesday 4:45 p.m. (K, 1, 2, 3, 4, 5)
- ___ Home Study + 1 Sunday/mo 1:00 p.m. (1, 2, 3, 4, 5)

Did your child attend Religious Education last year?

- ___ Yes, at OLOR ___ No, this is the first time
- ___ Yes, at _____ (Name of Parish)

Special Needs (Allergies, medical, physical):

SACRAMENTS
Has child been baptized?
___ No ___ Yes ___ Yes, but not Catholic
Has child received First Reconciliation?
___ No ___ Yes
Has child received First Communion?
___ No ___ Yes
Your child is <u>NOT</u> registered for Sacramental Prep until you complete the yellow Sacramental Prep registration form.

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