

2017-2018 Church School Registration

Family Last Name(s) _____ First Names of Parents/Guardians _____

Address _____ Home Phone # _____ E-mail address _____

Child's Name	Date of Birth	E-mail Address	Allergies	Comments

Does your child receive Holy Communion? Yes No

We accept donations to help defray the cost of materials.

() I give permission for _____ to have his/her picture or written work (with no name) in the newspaper or on the St. Anne's Website.

() I do not give permission to have photos taken or written work submitted anywhere.

Parent/Guardian Signature