

**Please Print**

**REGISTRATION & FEE DUE June 30, 2023**

**Family Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_

**Zip** \_\_\_\_\_ **Primary Phone** \_\_\_\_\_ **Emergency Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **email** \_\_\_\_\_

**Father's Name** \_\_\_\_\_ **Mother's First & Maiden Name** \_\_\_\_\_

**Are you a registered member of OLBS?** ..... **Yes** ..... **No**

**1. Child's Full Name** \_\_\_\_\_ **Grade in Sept. 2023** \_\_\_\_\_

First Name	Middle Name (not initial)	Last Name
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**Child's Birth Date** \_\_\_\_\_ **Place of Birth** \_\_\_\_\_

**Child's Baptismal Date** \_\_\_\_\_ **Baptismal Church** \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

**School Attending** \_\_\_\_\_

## Allergies

**Special Needs** \_\_\_\_\_

2. Child's Full Name \_\_\_\_\_ Grade in Sept. 2023 \_\_\_\_\_

First Name

Middle Name (not initial)

Last Name

Child's Birth Date \_\_\_\_\_ Place of Birth \_\_\_\_\_

Child's Baptismal Date \_\_\_\_\_ Baptismal Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

School Attending \_\_\_\_\_

Allergies \_\_\_\_\_

Special Needs \_\_\_\_\_

3. Child's Full Name \_\_\_\_\_ Grade in Sept. 2023 \_\_\_\_\_

First Name

Middle Name (not initial)

Last Name

Child's Birth Date \_\_\_\_\_ Place of Birth \_\_\_\_\_

Child's Baptismal Date \_\_\_\_\_ Baptismal Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

School Attending \_\_\_\_\_

Allergies \_\_\_\_\_

Special Needs \_\_\_\_\_

**PLEASE INDICATE WHAT DAY YOUR CHILD//CHILDREN WILL ATTEND REL ED EVEN IF YOUR CHILD/CHILDREN ARE CURRENTLY ENROLLED IN THE FALL PROGRAM.**

SUNDAY	MONDAY	TUESDAY	MONDAY EVENING	KINDERGARTEN
Grades 1-6	Grades 1-6	Grades 1-6	Grade 7 & Grade 8 Only*	3:45-4:45pm
8:50-9:50AM	3:45-4:45PM	3:45-4:45PM	7:00-8:00PM	<b>AVAILABLE ON</b>
			<b>*GRADE 7 &amp; GRADE 8 WILL</b>	<b>MONDAYS ONLY</b>
			<b>MEET EVERY OTHER WEEK</b>	

**Please consider assisting with your child's faith formation in one of the following ways:**

**PLEASE CHECK 1 or 2:**

CATECHIST (teacher).....AIDE TO CATECHIST.....SUBSTITUTE.....HALL MONITOR.....

**I GIVE \_\_\_\_\_/DO NOT GIVE \_\_\_\_\_ MY PERMISSION TO THE TAKING OF PHOTOGRAPHS, VIDEO AND IMAGES OF MEMBERS OF MY FAMILY BY OLBS FOR USE IN PROMOTIONAL MATERIALS, SHARING WITH THE PARISH COMMUNITY AND USE ON THE PARISH WEBSITE.**

**SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_**