Late Registration

Our Lady of the Presentation Parish CHILDREN'S FAITH FORMATION-REGISTRATION 2023-2024 for GRADES 1-5

Office use only		
Date: _		
Cash	Online	Check
Amour	nt \$	

ONE SESSION 5:30-6:45

PARENT/GUARDIAN INFORMATIO		TI DI	
Parent		Home Phone	
Address: City:		Subdivision	
City:	Zip	Cell Phone:	
		ess unless otherwise specifi	.ed)
Email address:			
Parent		Home Phone	
Address:		Subdivision	
City:	7in	Cell Phone:	
Email address:			
Linan address.			
We are members of Our Lady of the Presentat	tion Yes If no, we ar	re members of	
May we send you text message reminders's	? Yes No	<u> </u>	
Emergency Contact (if parent can't be read			
Name		Phone	
CHILD #1 INFORMATION			
	(last)		
Name (first) Day	v Year	Gender: Male	/ Female
SchoolBay	Grade i	n 2023-2024 school year	/ I Ciliare
T-Shirt Size: XS (2-4) S (6-8) M (10-1			
Circle Sacraments received : Baptism R			
CHILD #2 INFORMATION			
	(last)		
Name (first) Day	y Year_	Gender: Male	/ Female
School	Grade in	n 2023-2024 school year	
T-Shirt Size: XS (2-4) S (6-8) M (10-1	, , , , , , , , , , , , , , , , , , , ,	,	
Circle Sacraments received : Baptism R	econciliation(Confessio	n) Eucharist(Communion)	Confirmation
Make check payable to: Our Lady of the Prese	FAITH FORMATION Internation OR pay online through		.org) Online Giving
Multiple child discount includes all of our p 1 child - \$75	rograms for children.		
	TAL FAMILY FEE	Please let us know if this is a fin No one is turned away because of Scholarships are available.	
Circle other programs family members attend: (CGS MS Sunday School		
Registration Checklist: ☐ Registration Form Completely Fi ☐ Volunteer Opportunity Page Com		nck)	

□ Sacrament Preparation Page Completed for those preparing for First Reconciliation and First Eucharist

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Family Profile- for ALL families to consider
The following information is treated as confidential. Is there anything that would be helpful to know about your child or your family (illness/death in the family, single parent, different religious beliefs, areas of difficulty for the child such as trouble reading, areas of self-consciousness, allergies, etc?) If the information is about a specific child please specify which child has the need.
I would rather speak to someone in person. Please call me at
If your child has any special needs such as physical impairments, cognitive impairments, ADD, ADHD, learning disabilities,
vision impairments, hearing impairments, medical or behavioral conditions, we would like to contact you to get more information about how we can best serve your child.
The best time to reach me (name) is a.m./p.m. at (number)
regarding (Child's name)
Parent/Guardian Consent for Photos and Recordings
I hereby grant permission for this/these child(ren) to be included in the photographs, videos and other recordings taken at Our Lady of the Presentation and/or the Catholic Diocese of Kansas City – St. Joseph for the period of one year (August 2022-August 2023). I understand that once the photo has been published it becomes part of the parish archives and may be used in the future. I have read and agree to the above statement.
I do not grant permission for this/these child(ren) to be included in any photographs, videos and other recordings for a period of August 2023-August 2024.
(Parent/Guardian Signature) (Date)
Circle of Grace The Diocese of Kansas City – St. Joseph is committed to providing a safe environment for our children and youth. Our safe environment training programs educate and empower children and young people by providing them with essential knowledge and skills. Important life skills are taught to help protect them, give them the ability to distinguish between
appropriate and inappropriate behavior, and recognize and report potentially unsafe persons and situations. These safety programs are consistent with the teachings of the Catholic Church and the requirements set forth in the United States Conference of Catholic Bishops' <i>Charter for the Protection of Children and Young People</i> .
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programs are consistent with the teachings of the Catholic Church and the requirements set forth in the United States Conference of Catholic Bishops' <i>Charter for the Protection of Children and Young People</i> . I grant permission for my child on this registration to attend the safe environment training that is part of the approved safety
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