## Prince of Peace Parish Catechesis of the Good Shepherd Registration 2019-2020

Last Name			A	Address						
Father's Name Legal or Custodial Parent				Mother's Name Legal or Custodial Parent						
Religion:				Religion:						
Email Address:				Email Address:						
Telephone: Home Cell				Telephone: Home Cell						
For routine correspondence, I prefer to be contacted by	(check all that	apply) :	Home Phone	e Cell Ph	ione	Email				
Name and Information	Birth Date	Age	Sch	School		Baptized (yes/no)	Eucharist (yes/no)	Reconciliation (yes/no)	CGS Level / Day	
Child:										
Any medical information or special needs we need to know?										
Child:										
Any medical information or special needs we need to know?					•					
Child:										
Any medical information or special needs we need to know?										
If I cannot be reached during an emergency, call				relationship phone						
In addition to the above, my child can also be released to				relationship						
My child/ren will be enrolled in Level 1 (3-6 years old)	) / Atrium Limit	: - 10 Stu	Idents							
Level 1 - Monday 10:00-11:30 am Level 1 - Monday 4:30-6:00 pm						Level 1 - Wednesday 6:00-7:30 pm				
My child/ren will be enrolled in Level 2 (6-9 years old) / Atrium Limit - 15 Students Level 2 - Monday 4:30-6:00 pm							Level 2 - Wednesday 6:00-7:30pm			
My child/ren will be enrolled in Level 3 (9-12 years ol	d) / Atrium Lim	nit - 15 S	tudents							
			Level 3 - Mond	_Level 3 - Monday 4:30-6:00 pm				Level 3 - Wednesday 6:00-7:30pm		
Registration Fee: \$25/child or \$75.00/family		Please make checks payable to: Prince of Peace					* Scholarships are Available *			
Parent Signature		e	R	egistered Parishioner Yes / No			Chec	k No	Cash	