

ST MARY OF THE VISITATION PARISH CHILDREN'S MINISTRY

*J.K. - GRADE 1 - CHILDREN'S LITURGY
GRADE 2 - VISITATION KIDS
GRADE 3 - GRADE 4 - IWANNAGO:*

REGISTRATION FORM

Parent/Guardian's Name _____

Address _____

Home Phone _____

E mail address _____

Known allergies or other medical concerns or allergies:

***YOU MAY REGISTER CHILDREN
FROM THE SAME HOUSEHOLD ON ONE FORM.***

<u>Name of Child</u>	<u>Current Grade and School</u>	<u>Which Program? - Children's Liturgy, Visitation Kids or Iwannago</u>
1.		
2.		
3.		
4.		
5.		

REQUEST TO PARTICIPATE AND BEHAVIOR AGREEMENT: I request my child be permitted to participate in the Children's Ministry at St Mary of the Visitation Parish, Cambridge and hold harmless all volunteers and staff involved and agree to pay any damages which may be occasioned through the misconduct or carelessness of my son/daughter/ward to the person or property of any other party or parties. I also agree to photographs or video of my child being used for parish purposes.

SIGNATURE OF

PARENT/GUARDIAN: _____ DATE: _____

***PLEASE HAVE YOUR CHILD BRING THIS COMPLETED FORM ON THEIR FIRST SUNDAY
OR DROP IN THE COLLECTION BASKET .***