

ST. MARGARET MARY RELIGIOUS EDUCATION PROGRAM

REGISTRATION: 2018-2019

123 N 61st Street, Omaha, NE 68132 (402) 558-9119

Please print information:

Last Name of Student(s) _____

Student Address _____ City _____ Zip Code _____

Home Phone _____ Cell Phone(s) _____

Primary E-mail _____ Additional E-mail _____

Student lives with: _____ Both parents _____ Mother _____ Father _____ Legal Guardian
 If parents are separated/divorced, and mailings are to be sent to each parent, indicate here _____

Father/Guardian Name (Mr.)(Dr.) _____ Religion _____

Mother/Guardian Name (Mrs.)(Ms.)(Dr.) _____ Religion _____

Work Phone: (Father) _____ (Mother) _____ (Guardian) _____

If parents cannot be reached, please call: Name _____

Phone: _____ Relationship to Child: _____

To whom can we release your child(ren)? _____

All NEW students must provide a copy of their baptism certificate unless they were baptized at St. Margaret Mary Church. If they were baptized at SMM, please indicate here _____.

Sacraments Received in Catholic Church

Student's First Name & (Nickname)	Birthday M/D/Y	Sex F/M	Grade In Fall	School	Baptism	Recon.	Eucharist	Confirm.

Student Special Needs (e.g. food allergies, learning needs): _____

I hereby authorize a representative of St. Margaret Mary Church (SMM) to seek medical treatment for my child(ren) in the event of an emergency in which neither parent nor the adult in whose care the minor has been entrusted can be reached. I authorize any physician or medical center to treat my child(ren).

I hereby grant the right and permission to photograph or record my child(ren) for use in any form of SMM media including the church website.

Parent signature: _____

Registration Fee: Registered in St. Margaret Mary Parish - \$125.00 per child _____

Not registered in St. Margaret Mary Parish - \$175.00 per child _____

The registration fee... OR a \$20 deposit is due at time of registration.

(over)

ALL PARENTS ARE EXPECTED AND NEEDED TO VOLUNTEER!

Volunteer Opportunities: Parents are requested to volunteer their assistance to the Religious Education Program. We do need your help for students' safety, learning environment, hospitality. Please volunteer for something you would enjoy.

<u>YOUR NAME</u>	<u>ROLE</u>
_____	CATECHIST
_____	CATECHIST ASSISTANT
_____	SUBSTITUTE CATECHIST
_____	PARENT ADVISORY BOARD MEMBER.
_____	HOSPITALITY (set-up treats for socials)
_____	CANTOR FOR MASSES
_____	PRAYER PERSON (6:30- 7:45)
_____	AUDITORIUM MONITOR (6:15-6:35)
_____	PARKING LOT MONITOR (before and after class)
_____	ROOM PARENT (organizes treats for parties)

Please send completed registration form plus fee to:
SMM Religious Ed Office
123 N. 61st St., Omaha, NE 68132
Or register on the SMM website: smmomaha.org

Amt pd _____ Chk #/Paypal _____ Date _____ Email sent _____ Volunteer list _____