

**Ascension Parish, Forest City, CCD Registration 2019/2020**

**Name of Child:** \_\_\_\_\_

**Date/Place of Birth:** \_\_\_\_\_

**Grade:** \_\_\_\_\_

**School District:** \_\_\_\_\_

**Date/Place of Baptism:** \_\_\_\_\_

(if your child was baptized in another parish, please provide a baptismal certificate)

<b>Parent/Guardian</b>		My child lives with (Father, Mother, Both Parents, Guardian, etc.): _____
	FATHER	MOTHER
NAME		
ADDRESS		
CELL #		
HOME #		
E-MAIL		

In the event of an emergency, please call (list in order of priority). The 2<sup>nd</sup> and 3<sup>rd</sup> options will only be contacted as alternatives:

- 1.
- 2.
- 3.

Please list any special Medical Conditions/ Prescribed Medications that apply to your child.

Please list any restrictions/allergies (i.e. milk, peanut butter) or other information we need to ensure a safe environment for your child. Please list any learning ability or disability that will help us to provide a proper learning environment for your child.

PHOTO RELEASE PERMISSION for my child's picture to appear on upcoming parish website/social media, bulletin boards, parish bulletin, local and diocesan newspapers.

- I give permission [Please initial here \_\_\_\_\_]
- I do NOT give permission [Please initial here \_\_\_\_\_]

**CCD Code of Conduct**

I have read the attached Ascension Parish CCD Code of Conduct. I agree to the rules and regulations stated and understand there are consequences for misbehavior.

Parental review and signature

Date

Please indicate as a parent or guardian if you are willing to be considered for the following volunteer positions (check all that apply to you):

\_\_\_\_\_ I would be willing to be serve as a CCD teacher in the future

\_\_\_\_\_ I would be willing to be serve as a substitute CCD teacher this year or in the future

\_\_\_\_\_ I would be willing to be serve as a volunteer or aide this year or in the future

Ascension Parish is dedicated to spreading God's Word to all, regardless of your financial situation. If you are unable to make the full payment or no payment at all, please contact Fr. Clarke at 570-785-3838.

Fees are due upon registration

1 child = \$10.00

2 children = \$15.00

3 children = \$20.00

4 or more = \$25.00

Checks payable to *Ascension Parish*

\_\_\_ **Registration form (one per family)** \_\_\_ **Medical release form for each child** \_\_\_ **Discipline code (one per family)**