

Registration Form

Children *entering* Kindergarten thru Grade 5 are invited to register.

Date: Monday July 16 – Friday July 20, 2018

Time: 9am -12pm

Fee: \$25 per Child

Registration deadline Friday July 6th

Please drop off or mail registration form & fee (make checks payable to Holy Name of Jesus Parish) to the Faith Formation Office at 2 Mary Avenue, Stratford, CT 06614. Additional forms can be found on Holy Name of Jesus website: hnojchurch.org.

Child's Name: _____ Age: _____ Grade Entering Fall 2018 _____

(Child T Shirt Size: SM M LG XL) Allergies/Medical conditions: YES _____ NO _____ (If YES, please describe: _____)

Child's Name: _____ Age: _____ Grade Entering Fall 2018 _____

(Child T Shirt Size: SM M LG XL) Allergies/Medical conditions: YES _____ NO _____ (If YES, please describe: _____)

Mother's Name _____ Father's Name _____

Address: _____ City: _____ State _____ Zip code _____

EMAIL _____ Home Phone: _____ Cell _____

In Case of Emergency~Name _____ Home _____ Cell _____

ADULTS AUTHORIZED FOR PICKUP (name & number please):

1. _____

2. _____

Faith Formation Director: Diane Scott: (203) 375-5815 or dreholynname@gmail.com