2013-2014 Church School Registration

Family Last Name(s)	First Names of Parents/Guardians			
Address	Home Phone #		E-mail address	
Child's Name	Date of Birth	E-mail Address	Allergies	Comments
Does your child receive Holy Com	munion? Yes _	_ No		
We accept donations to help defra	ay the cost of mate	erials.		
() I give permission for the St. Anne's Website.	to ha	ve his/her picture or wri	tten work (with no name)) in the newspaper or on
() I do not give permission to hav	e photos taken or	written work submitted	anywhere.	
Parent/Guardian Signature				