

St. Gregory Catholic Church
“WEE” SUNDAY MORNING WITH JESUS
for 1 and 2 year olds.
REGISTRATION FORM 2015-2016

PLEASE PRINT

Date: _____ Mass Time (check one): _____ 9:00 AM _____ 10:30 AM

Family Name: _____ First: _____
Mother Father

Child #1: _____
First Name Last

Age: _____ Date of Birth: _____

Child # 2: _____
First Name Last

Age: _____ Date of Birth: _____

Address: _____
Zip _____

Home Phone Number: _____ Cell: _____

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

E-mail address _____
(PLEASE PRINT)

Does your child currently attend child- care, and if so where? _____

Are you a registered member of St. Gregory Parish? _____

Do you participate in any of the Parish ministries? If so, which? _____

Please enclose a non-refundable registration fee of \$30.00 per child per school year (August – June). **Return this Registration Form and the fee to the Rectory c/o Ministry Office- as soon as possible. Notification of Acceptance and Year’s Calendar will be emailed to you after August. For more information call the Ministry office 954-473-6261 Ext. 136**

For office use only: _____ Date Received: _____
Registration Fee Paid _____ Date Notified: _____