

Our Lady of Perpetual Help (OLPH)

Syro-Malabar Catholic Mission of Greater Washington
Sunday School 2016-2017

Registration Form

STUDENT INFORMATION

SL #	NAME [LAST, FIRST, M.]	GRADE	First Communion /Confirmation	ALLERGY	FEE*
1					
2					
3					
4					
5					
				TOTAL	

*Fee for each student is \$40.

[Indicate if the student is a Communion or Confirmation candidate this school year]

PARENT INFORMATION

Parent	NAME [LAST, FIRST, M.]	CELL	EMAIL
FATHER			
MOTHER			

ADDRESS

EMERGENCY CONTACTS [Give 2]

NAME [LAST, FIRST, M.]	CELL	RELATIONSHIP TO STUDENT

PARISH MEMBERSHIP [For Parents]

Are you a registered member of the OLPH Mission? Yes No

If "No", Please complete and provide the Membership form along with the Sunday School Registration Form

PAYMENT : Make Checks payable to OLPH Syro Malabar Mission or Cash

SIGNATURE

Parent: _____ Principal/Teacher: _____ Date: __/__/__

Address: 14135 Seneca Road, Darnestown, MD 20874