

**OUR LADY OF LOURDES PARISH
RELIGIOUS EDUCATION OFFICE
5835 Glenway Avenue, Cincinnati, Ohio 45238**

**RELIGIOUS EDUCATION PROGRAM REGISTRATION FOR GRADES 1-8
2018-2019 FEES: \$80/1 child; \$120/2 children; \$140/3 or more children**

CHILD'S NAME _____ SEX: M / F NICKNAME _____

ADDRESS _____ ZIP _____ HOME PHONE _____

BIRTHDATE _____ GRADE (2018 - 2019) _____ SCHOOL _____

PARISH OF REGISTRY _____

LOCATION OF PREVIOUS RELIGIOUS INSTRUCTION (IF ANY) _____

MOTHER: FULL NAME _____ RELIGION _____
ADDRESS _____ CELL PHONE _____
(If different from child)
OCCUPATION _____

FATHER: FULL NAME _____ RELIGION _____
ADDRESS _____ CELL PHONE _____
(If different from child)
OCCUPATION _____

PREFERRED E-MAIL ADDRESS _____

IF DIVORCED, CUSTODIAL PARENT _____

NAME AND AGE OF SIBLINGS _____

SPECIAL LEARNING NEEDS

Does your child participate in a special educational program? Y / N

If yes, please describe: _____

MEDICAL PROBLEMS OR CONSIDERATIONS

A) SEIZURES _____ D) OTHER _____
B) MOTOR DIFFICULTIES _____
C) FOOD ALLERGIES _____

(over)

We would like to be able to help your child learn in the best way possible. Please include any information that will help us to teach your child. We will only share this information with your child's catechist.

1. My child's approximate reading level _____

2. My child is best at _____

3. My child most enjoys _____

4. My child least enjoys _____

5. Ways I have tried to help my child (with behavior or school work) that have worked are:

6. Ways that did not work are:

7. Special concerns I have: _____

8. Are you willing to volunteer in the program (i.e. teacher aid, office help, special activities)?

9. If this is your child's first year, how did you hear about our program?
