

ATRIUM REGISTRATION FORM FOR 2017-2018
Level I (3-6 Years Old), Level II (6-9 Years Old), and Level III (9-12 Years Old)
 Registration Deadline: Received by August 31, 2017

CONTACT INFORMATION

Parents' Names: _____ Parish: _____

Address: _____
STREET ADDRESS CITY ZIP

Phone Numbers: () () ()
PRIMARY (please specify) ALTERNATE 1 (please specify) ALTERNATE 2 (please specify)

Email: _____
EMAIL 1 EMAIL 2

CHILD/ATRIUM INFORMATION

Level I Atrium Sessions:[†]

1A. Mondays from 4 p.m. to 6 p.m.
 1B. Wednesdays from 9 a.m. to 11 a.m.

Start Date:

September 11, 2017
 September 13, 2017

[†] Each child attends the same atrium session every week.

Level II and III Atrium Sessions:[†]

2A and 3A. Tuesdays from 4 p.m. to 6 p.m.
 2B and 3B. Thursdays from 4 p.m. to 6 p.m.

September 12, 2017
 September 14, 2017

Child's Name <small>(For more than 3 children, print additional sheets or write the info. on the back of this form.)</small>	Birth Date [◊] <small>(MM/DD/YYYY)</small>	Baptism Date <small>(MM/DD/YYYY)</small>	Session Preference <small>(1A, 1B, 2A, 2B, 3A, 3B) (List 1st and 2nd choice.)</small>	Allergies/Other Information <small>(Attach separate sheet if necessary.)</small>	Is this child registered for any other catechism program? If so, where?	Has this child received First Holy Communion?
1.						
2.						
3.						

[◊] New Level I children should have turned 3 years old by September 1, 2017, and may not turn 7 years old before June 1, 2018.

All children must be potty trained. New 3-year-olds may be subject to a trial period.

Level II and III children must have attended Level I for at least 1 year or have received permission to register.

EMERGENCY CONTACT INFORMATION (OTHER THAN PARENTS; THESE PEOPLE MAY PICK UP CHILD FROM ATRIUM)

Name: _____ Relationship: _____

Phone Numbers: () ()
PRIMARY (please specify) ALTERNATE (please specify)

Backup Name: _____ Relationship: _____

Phone Numbers: () ()
PRIMARY (please specify) ALTERNATE (please specify)

OTHER PERSONS AUTHORIZED TO PICK UP CHILD FROM ATRIUM (OTHER THAN EMERGENCY CONTACTS)

Name: _____ Relationship: _____

Name: _____ Relationship: _____

MONETARY DONATION

A minimum donation of **\$100 per child** is requested in order to support the operation of the atrium. While there is no fee or charge for participation in the atrium, the requested donation amount per child will assist in covering such as expenses as materials, supplies, and insurance.

Donations are requested together with the submittal of this registration form. Checks should be made out to *Vox Pastoris*. Donations will not be deposited until after the registration deadline.

Additional financial contributions will be gladly accepted, which will serve to grow the atrium and support those who cannot afford to donate the minimum requested contribution. All donations to Vox Pastoris are tax deductible.

OTHER PARENT CONTRIBUTIONS

In addition to monetary donations, parents are encouraged to contribute to the success of the atrium in other ways. Please indicate which of the following ways you can contribute this year:

- Making new materials as needed (examples: painting, sewing, calligraphy, woodwork)
- Babysitting small children of catechists and assistants during the atrium session
- Occasionally serving as an assistant in the atrium
- Bringing flowers to the atrium
- Helping with ongoing atrium needs, such as shopping for supplies or washing linens

ACKNOWLEDGEMENTS

- I have read, I understand, and I agree to abide by the policies of Vox Pastoris found at www.voxpastoris.org under "Policies."
- I have signed the attached Liability Release.

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Please enclose this form, the attached Liability Release, and a donation check made out to *Vox Pastoris* in the amount described above. Mail the completed materials to:

Vox Pastoris
c/o Robert Lopez
16501 Midfield Lane
Cerritos, CA 90703

Registration Deadline: Received by August 31, 2017

LIABILITY RELEASE

I, _____ (“Parent”), acknowledge that my child(ren) _____ will participate in catechesis conducted by Vox Pastoris, a charitable, nonprofit, tax-exempt organization, at property owned by Portia Joseph (“Homeowner”). I hereby agree that I, my assignees, heirs, next of kin, spouse and legal representatives will not make a claim against, sue, or attach the property of Homeowner or Vox Pastoris for injury or damage resulting from the negligence or other acts, however caused, by any director, employee, agent, or contractor of Homeowner or Vox Pastoris related to our participation in the catechesis. I forever release Homeowner and Vox Pastoris from any and all action, claims or demands that I, my assignees, heirs, next of kin, spouse and legal representatives now have or may hereafter have for injury or damage related to our participation in the catechesis. I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and a contract between myself and Homeowner and/or Vox Pastoris, and sign it of my own free will.

Executed in _____ County, California, on _____ .
LOS ANGELES / ORANGE DATE

Signature of Parent or Legal Guardian: _____