

**ATRIUM REGISTRATION FORM FOR 2018-2019**  
**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, 2018

**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:<sup>†</sup>

1A. Mondays from 4 p.m. to 6 p.m.  
 1B. Wednesdays from 9:30 a.m. to 11:30 a.m.

Start Date:

September 10, 2018  
 September 12, 2018

<sup>†</sup> Each child attends the same atrium session every week.

Level II and III Atrium Sessions:<sup>†</sup>

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 11, 2018  
 September 13, 2018

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 <sup>◊</sup> <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.						

<sup>◊</sup> New Level I children should have turned 3 years old by September 1, 2018, and may not turn 7 years old before June 1, 2019.

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, we rely on donations to cover such as expenses as materials, supplies, utilities, and insurance.

Donations are requested together with the submittal of this registration form. Checks should be made out to *Vox Pastoris*. Please check one of the following:

- Please deposit my donation as soon as possible. I understand that it is nonrefundable.
- Please wait to deposit my donation until after the first week of atrium.
- I will not be making a donation at this time for the following reason:

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 any of these ongoing atrium needs (please indicate any that you are able to do):
  - Washing and ironing linens
  - Preparing candles for special celebrations
  - Shopping for supplies
  - Cutting out paper pieces for collage work

**ACKNOWLEDGEMENTS**

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

Signature of Parent or Legal Guardian	Printed Name	Date

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, 2018**

**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: \_\_\_\_\_