

St. Anthony the Great Orthodox Christian Church

2018 – 2019 Church School Registration Form

Registration Fee: \$25/child

Name of Student	DOB (mm/dd/yy)	Baptismal/ Saint's Name	Grade (PK-12 th)
1)			
2)			
3)			
4)			
5)			

NOTICE TO PARENTS: Your child must be at least 4 years old by September 1st to register.

CONTACT INFORMATION

Parent(s) Name(s) _____

Address _____ City _____ ZIP _____

Home No. _____ Cell No. _____

E-mail _____

Diagnosed allergies? _____

PARENT AUTHORIZATION, MEDICAL CONSENT AND PHOTO RELEASE FORM

*My child(ren), (full name) _____, has my permission to participate in classes, activities and photos to be published in the classrooms of St. Anthony the Great Church School during the **2018-2019** school year. I understand that reasonable precautions will be taken to safeguard his/her health and safety, and that I will be notified as soon as possible in any emergency. Also, I will not hold liable any Orthodox Church, its clergy, Council members, staff, volunteers, the Antiochian Orthodox Christian Archdiocese of North America, nor any individual lending or giving his/her private property to be used in connection with this program, for any illness or accident. If I am unable to be reached, and the occasion demands, I further authorize any treatment and hospital care advisable under the supervision of licensed medical physician. Such treatment to include x-ray, examination, anesthetic, medical, dental or surgical diagnosis.*

Signature of Parent or Legal Guardian _____

Date _____

PLEASE CONTINUE ON THE BACK TO COMPLETE THIS FORM.

Church School Policy Agreement

The 2018 – 2019 Church School Parent Handbook can be found on the Church Website (www.StAnthonytheGreat.org), in the narthex, and on the information table in the Fellowship Hall.

I have read the 2018 – 2019 Church School Parent Handbook. I acknowledge that my child(ren) must adhere to the expectations stated in order to maintain an atmosphere conducive to Christian education and positive fellowship.

Student(s) Name: _____ Parent Name: _____

Parent Signature: _____ Date: _____

Please sign and return to a Church School Director or the Church Office.