SYRO-MALABAR RITE

For Children who are preparing for their Sacramental life according to the Syro-Malabar Rite

PRIMARY SCHOOL CATECHETICAL PROGRAMME

What Year will your child be in at school this September?	YEAR
Child's Full Name:	
Child's Date of Birth:	
Date of Baptism:	
Was your Child also Confirmed and given Holy Communion at t	the Baptism?
If YES in which parish and for how long?	
Name of the Parish	
Location	
Which Year?	
Father's Name:	
Mother's Name:	
Address:	
Post Code:	
Home Tel No:	
Mobile No:	
other Mobile No:	
Parent's e-mail:	
Does your child attend a Catholic primary school?	
Has your child previously attended any catechetical classes?	

PLEASE TURN OVER AND COMPLETE THE REST OF THE REGISTRATION FORM

Please give details of any medical problems which may affect your child during classes.
Does your child normally have additional help at school for any reason?
EMERGENCY CONTACT
In case of sudden illness or some other kind of emergency which resulted in the class finishing early, it would be helpful if you could supply us with a couple of emergency contacts who could collect your child if we were unable to contact you.
Name:
Tel No:
Name:
Tel No:
I give permission for my child to take part in the normal activities of this group.
I have read and understood the letter explaining the terms conditions of attending the catechism classes at St Philip Howard.
I give permission for my child to be photographed by the official parish photographer during the First Holy Communion Mass.
In signing this form I agree that the information given above may be securely held by St Philip Howard Parish and that Schedule 3 of the 1998 Data Protection Act may apply.
Print Name:
Signed:

Dated: