West Seneca Regional Catholic Summer Program 2021-2022 at Fourteen Holy Helpers Parish

Family Name:	Parish	1:	Home #	<u></u>
Address	Zi	p code		
Mother's maiden Name:		Email#:		_
Cell#:				
Father's Name: :	Emai	il#	Cell#	
Are there any custody arrang	gements we need to be a	ware of? if y	ves, please attach a copy of pe	ertinent documents.
Child's First & Name	e Birthdate	Religious Ed grade 2021-2022	Sacraments Received: Church and dates of	Special Needs (learning, medical, allergies, etc.
			Baptism: Reconciliation: Eucharist:	
			Baptism: Reconciliation: Eucharist:	
			Baptism: Reconciliation: Eucharist:	
Emergency contacts (during	religious education hou	rs)		
Name		Relation	ship	
Phone #			ne #	
A. (1)I understand that atte	endance for all 5 days is	mandatory. (2) I will b	e sure not to schedule appoir	ntments, vacations, day trips, etc.
during the days of the pr	rogram. (3) As a criteria	for participation in this	s program: (a) I understand t	nat regular Mass attendance is
expected throughout the	e year. (b) My child will p	erform at least five ho	ours of service; and (c) My ch	ild will need to attend two more
activities. (4) I also unde	erstand that if my child b	ehaves inappropriatel	y, he or she will be asked to	leave the program and will be
required to attend class	<u>es during the regular sch</u>	<u>iool year. There are n</u>	<u>o refunds for students who a</u>	re expelled.
B. I hereby give my permis	ssion for my child to atten	d and participate fully	in all aspects of the West Sen	eca regional Catholic Summer
Program. I understand the	nat in the case of an emer	gency, every effort wil	I be made to contact me. In t	he event that I cannot be reached, I
give permission to emerg	gency personnel to secur	e proper treatment, inc	cluding hospitalization, anesthe	esia, surgery, or injections of
_	= :	-		teen Holy Helpers, and Queen of
				occurrence on or about the premises
where religious education	n activities are taking plac	ce, causing injury to an	y person or property.	
Parent/Legal Gu	uardian Signature		Date	

Please call me.	I am interested in volunteering as a _	Catechist _	Catechist Asst	Office Asst	Lunch Room Asst
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Once again this year the West Seneca Regional Catholic Churches will be holding a Summer Faith Formation Program for **Grades 6 though 10.** This program as well as two other activities and five hours of approved service will fulfill the Diocesan requirements for Faith Formation programming for public school students for the 2021-2022 catechetical year. There is a **\$60.00 per student fee (no discounts)** for this program.

Please read the following over carefully and if it seems that this program would be beneficial to your family, fill out and return the registration form along with your fee to hold your spot. Payment is due, in full, by August 10th. Full details about the program will be sent to your email mail before the program begins.

By registering your child (ren) you agree to the following:

- The sessions will be held on Monday, August 23rd through Friday, August 27th.
- Classes begin promptly every day at 9:00 AM. On Monday through Thursday they end at 3:00 PM and, on Friday, they end at 1:30 PM.
- Students will need to attend all five days in order to be exempt from classes during the regular school year.
- Please do not plan any field trips, appointments, or other activities during school hours.
- If your child is asked to leave the program due to behavior or attendance issues, the registration fee will not be returned.
- Each student is required to bring a bag lunch on Monday through Thursday. We will provide pizza for lunch on Friday. Drinks and morning snacks will be provided everyday of the program.
- Weekly Mass attendance during the whole year, at least five hours of service, as well as two other activities during the school year is a requirement.

	If you have	any questions, p	lease conta	ct my office	at 716-67	4-2180 or	at blessedje	ohnreled@	yahoo.com.
Date Registered		Amount Paid		Date Paid_		Check # _		Initials	