

Please complete one registration form for EACH child in the family.

St. Thomas More University Parish  
& Catholic Student Center  
1200 Oakland Avenue  
Indiana, PA 15701  
724-463-2277

Catechesis of the Good Shepherd  
Level I Registration Ages 3 - 6  
2011 - 2012

Child's Name \_\_\_\_\_

M \_\_\_\_ F \_\_\_\_ Age \_\_\_\_ Date of Birth \_\_\_\_\_

Name of School \_\_\_\_\_ Grade entered this fall \_\_\_\_\_

Please mark your session choices in order of preference.

Mondays                      Wednesdays                      Thursdays

5:45 - 7:45PM \_\_\_\_                      5:15-7:15 PM \_\_\_\_                      9:30 - 11:30 AM \_\_\_\_

4:15 - 6:15 PM \_\_\_\_

Parents' Names \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Work Telephone # \_\_\_\_\_

Work Telephone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

E-mail Address \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Telephone # \_\_\_\_\_

List any allergies and/or serious illness we need to be aware of: \_\_\_\_\_

Are you registered at St. Thomas More University Parish? \_\_\_\_\_

Has your child been baptized? \_\_\_\_ Parish \_\_\_\_\_ Year \_\_\_\_\_

**Registration and Materials Fee: \$20.00 per child/ \$50.00 per family**

*Scholarship monies available to cover these fees if needed;  
please contact Mary Beth Palko for more information.*

**Make checks payable to St. Thomas More University Parish.**

**All Registration Forms MUST BE RETURNED  
to the Parish Office BY SUNDAY, AUGUST 28, 2011.**

<u>Office Use Only</u>	
Amt. Pd. \$	_____
Check #	_____
Cash	_____
No. of Children in Family	_____
PDS	_____

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## PHOTOGRAPHIC RELEASE LETTER

I hereby grant to the Diocese of Greensburg, Pennsylvania, and its respective licensees, successors and assigns, the right and permission, with respect to those photographs taken of me or the minor named below on whose behalf I am signing, and with respect to any printed or electronic matter in connection therewith, to do the following:

1. To include such photographs on the Diocese of Greensburg website
2. To use my name, or the name of the minor on whose behalf I am signing, in connection with the foregoing.

I hereby release, discharge and agree to indemnify and hold harmless the Diocese of Greensburg and its legal representatives, licensees, successor and assigns, from all claims and demands whatsoever arising out of or in connection with the foregoing, and waive any right to inspect or approve the same.

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Signature of Parent/Guardian / Participant

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Signature of Subject of Photograph

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Name and Address (please print)

I hereby certify that I am the *[parent and/or guardian]* of \_\_\_\_\_, a minor under the age of eighteen years, and hereby consent on behalf of said minor to the use of any of the photographs taken of said minor pursuant to the terms set forth in this Photographic Release, including, without limitation, the release, discharge and hold harmless provisions thereof.

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1200 Oakland Avenue  
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724-463-2277

Catechesis of the Good Shepherd  
Level II Registration Grades 1-2-3  
2011 - 2012

Child's Name \_\_\_\_\_

M \_\_\_\_ F \_\_\_\_ Age \_\_\_\_ Date of Birth \_\_\_\_\_

Name of School \_\_\_\_\_ Grade entered this fall \_\_\_\_\_

Please mark your session choices in order of preference.

Tuesdays                      Wednesdays                      Thursdays

4:45 - 6:45 PM \_\_\_\_                      5:15 - 7:15 PM \_\_\_\_                      4:15 - 6:15 PM \_\_\_\_

6:30 - 8:30 PM \_\_\_\_

Parents' Names \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Work Telephone # \_\_\_\_\_

Work Telephone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

E-mail Address \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Telephone # \_\_\_\_\_

List any allergies and/or serious illness we need to be aware of: \_\_\_\_\_

Are you registered at St. Thomas More University Parish? \_\_\_\_\_

Has your child been baptized? \_\_\_\_ Parish \_\_\_\_\_ Year \_\_\_\_\_

Will your child be receiving sacraments this year? \_\_\_\_\_

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Office Use Only

Amt. Pd. \$ \_\_\_\_\_

Check # \_\_\_\_\_

Cash \_\_\_\_\_

No. of Children in Family \_\_\_\_\_

PDS \_\_\_\_\_

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Catechesis of the Good Shepherd  
Level III Registration Grades 4-5-6  
2011 - 2012

Child's Name \_\_\_\_\_

M \_\_\_\_ F \_\_\_\_ Age \_\_\_\_ Date of Birth \_\_\_\_\_

Name of School \_\_\_\_\_ Grade entered this fall \_\_\_\_

Mondays

5:45 - 7:45PM \_\_\_\_

Parents' Names \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone # \_\_\_\_\_ Work Telephone # \_\_\_\_\_

Work Telephone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

E-mail Address \_\_\_\_\_

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No. of Children in  
Family \_\_\_\_\_

PDS \_\_\_\_\_

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