**Catholic Sacramental Preparation Class**

**Application Form**

Please complete this form using MS Word and forward the document to [cpgbetns@gmail.com](mailto:cpgbetns@gmail.com).

I      (parent/guardian) wish to enrol       (child’s name) in the 2 year Catholic Sacramental Preparation Class from September 20      (enter year).

Child’s current class in school :

Child’s current teacher in school :

Parent/guardian’s e-mail address:

Main contact mobile phone number:

Emergency contact number (if needed during class):

Most communication with families is via e-mail or text. If you wish these notifications to be sent to both parents/guardians please provide the 2nd email address and mobile number here:

2nd email:      2nd mobile:

Please select which of the following will apply to your child:

will be collected after religion class

is allowed leave the class unaccompanied (from Holy Trinity Parish complex)

I       (enrolling parent/guardian) acknowledge that it is my responsibility to inform any other parent/guardian of my child’s attendance at these classes.

I understand that if my email address or mobile phone number changes I must inform the Catholic Parents Committee.