

SCHOOL OF RELIGION 2024-2025



Our Lady of the Presentation P.O. Box 428 · Poolesville, MD 20837 · 301-349-2045

FAMILY LAST NAME: _____

EMAIL is our main communication for all faith formation. To receive information from the director and teachers about weather closures, schedule changes, student service opportunities and retreat information, please list your family email(s).

EMAIL(S): _____

ADDRESS: _____

FATHER'S FULL NAME: _____

Work Phone: _____ Cell Phone: _____

MOTHER'S FULL NAME: _____

Work Phone: _____ Cell Phone: _____

Contact Information:

Director of School of Religion: Jessica Anderson olpdsor@olpresentationmd.org

Coordinator for School of Religion: Cosma Spassiani cspassiani@gmail.com

Student Full Name Please list multiple children oldest to youngest for accurate fees (use full name as for official certificates)	D.O.B.	Place of Birth	Sacraments Received			School Grade 2024-2025								
			Baptism	Penance	Holy Communion	K	1	2	3	4	5	6	7	8
						\$150	\$150	\$200	\$150	\$150	\$150	\$150	\$150	\$225
						\$75	\$75	\$125	\$75	\$75	\$75	\$75	\$75	\$150
						\$75	\$75	\$125	\$75	\$75	\$75	\$75	\$75	\$150
						\$0	\$0	\$50	\$0	\$0	\$0	\$0	\$0	\$75

*** Baptismal certificate required for new registrants**

Registered with OLP? **YES NO** (+\$100/child)

Enrolled before September 6, 2024? **YES NO** (+\$25/child)

COST TOTAL: _____ Cash or check, no credit cards.

Mail payments and this completed form to:

Our Lady of the Presentation

P.O. Box 428

Poolesville, MD 20837

Health Concerns: If any child you are registering has medical or health concerns we might need to address during class, including allergies, please describe them here: _____

Permission to Participate Waiver:

The 2024-2025 Our Lady of the Presentation School of Religion will have sessions on-site at Poolesville Elementary School. Our catechists include active parish volunteers or employees who are subject to the Archdiocese of Washington's Child Protection and Safe Environment Policy.

I understand that, as parent and/or legal guardian, I remain legally responsible for any actions taken by my child/children (named above). My child/children agree(s) to abide by all rules and regulations outlined for participation in the program.

Office for Catechesis and the Archdiocese of Washington will not be held liable if my child fails to cooperate with said regulations and that any infractions of the rules may result in immediate dismissal from the activity.

Class Time and Location:

Sunday SOR - start date September 29, 2024:

- Time: 9:15-10:30am
- Location for Grades K - 8: Poolesville Elementary

I give my permission for my child(ren) (named above) to participate in the Our Lady of the Presentation School of Religion. I understand that children will be well supervised and I will not hold Our Lady of the Presentation Catholic Church, its employees, or volunteers responsible if an accident should occur. By signing this, I agree to the policies outlined above and in the Parent Handbook.



Parent Name (please print)

Signature

Date