BEATITUDES OF OUR LORD CATHOLIC COMMUNITY
OFFICE OF RELIGIOUS EDUCATION
13013 Santa Gertrudes Avenue
La Mirada, CA 90638

PERMISSION AND AGREEMENT FORM
2011-2012 SCHOOL YEAR

Thank you for choosing to invest in Religious Education for your child(ren) at Beatitudes of Our Lord Catholic Community. We recognize parents are the primary educators of their children and our role is to support the ongoing faith formation as you:

- Attend weekly Mass with your children and receive the Sacraments.
- Agree to direct your child to cooperate and conform to the directions and instruction of the supervisory personnel in charge of the classroom and program.
- Participate in parish activities: through service, outreach and hospitality.
- Volunteer 10 hours in the program or in lieu of service hours $75.00.
- Children participate in the Protecting God's Children "Teaching Touching Safety Program".

Only list chid(ren) being enrolled in our program.

_____ _____
Child(ren) Name(s) Grade

_____ _____
Child(ren) Name(s) Grade

_____ _____
Child(ren) Name(s) Grade

_____ _____
Child(ren) Name(s) Grade

- □ Yes, I give my permission for my student's picture, and name, to be used for publication(s) relating to school activities.
- □ No, I do not give my permission for my student's picture, and name, to be used for publication(s) relating to school activities.

_____
Parent's Name (Print)

_____ _____
Parent's Signature Date