

Welcoming the Little Ones Registration/Volunteer Form
St. Francis Xavier Parish
1708 E Tenth Street, Merrill, WI 54452
2011-2012 School Year

Welcoming the Little Ones is a preschool program designed for children ages 3 to 6 years of age. Our goal is to provide very basic catechesis on the Sunday Gospels to the children through stories, gospel readings, and age-appropriate activities. This pre-school 20 minute Sunday Gospel Lesson is held during the 10:00a.m. Mass on Sundays at St. Francis Xavier Catholic Church. The children begin Mass with their parents in church and then proceed out with the group of children for the lesson up in the school. They return to church shortly after Father's homily.

Child(ren)'s Name(s): _____ Birthdate(s): _____

Parents' Names: _____

Address: _____ Phone: _____

Cell Phone: _____ E-mail: _____

_____ My child(ren) was baptized at another parish, and a copy of the Baptismal Certificate is attached.

**It takes many volunteers to make this program possible for our littlest church members. We need a minimum of 2 teachers each Sunday. Please help in any way that you are able. All volunteers must attend a Safe Environment Training session and have a background check to volunteer. This is very easy to do and can be done by contacting our DRE, Mr. Joe Velie, at (715) 536-2803 ext. 222.

I can help: _____ Teach a lesson _____ Assist the teacher during the lesson

Signature: _____ Date: _____

For your child's safety while participating in the Welcoming the Little Ones Religious Ed program:

1. Please check if your child has the following: _____

Vision Problems _____

Diabetes _____

Hearing Problems _____

Cancer _____

Attention Deficit Disorder _____

Stomach/Bowel Problems _____

Skin Problems/Rashes _____

Muscle/Joint/Bone Problems _____

Allergies _____ Serious

Accident(s)/Injuries(s) _____

Behavior Problem _____

Frequent Colds/Sore Throats _____

Asthma _____

Epilepsy/Seizure Disorders _____

Respiratory Problem _____

Severe Headaches _____

Heart Problems _____

Kidney/Bladder/Urine Problems _____

Operation(s)/Hospitalization(s) _____

Specific Health Care Needs _____

Food Allergies: _____

Other: _____

2. Please list any additional information in regard to the conditions listed above that would be helpful in caring for your child:
