

Deadline for Summer
Registration is May 1, 2019.

2019 6th and 7th Grade Summer Program



NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE (home/cell/office) _____

PARENT (s)/GUARDIAN NAME _____

In case of emergency, please contact: (REQUIRED)

Name: _____

E-MAIL _____

SACRAMENTS COMPLETED:

- ☐ BAPTISM please attach copy of certificate.
- ☐ RECONCILIATION
- ☐ FIRST COMMUNION

Relationship: _____

Phone Number: _____
(home/cell/office)

Wednesday, June 19
Thursday, June 20
Friday, June 21
Tuesday, June 25
Wednesday, June 26
Thursday, June 27

1pm-4:30pm
Fr. Larry Jackson
Youth Center

We are pleased to once again offer our SUMMER FLT PROGRAM for grades 6 and 7. Before you register for this program, please read over the following information:

- You must commit to attending all 6 scheduled classes and any workshops/etc. scheduled during the school year.
- Your child may not miss any class time or workshops.

- You must be a registered member of St. Michael as of February 1, 2019.

(Registration forms for Grade 8, Grades 1-7 Fall and Home Study, and Sunday School will be mailed separately.)

As an alternative to the Summer Session, we will continue to offer the traditional school year program and Home Study program. These programs begin in October and those registration forms will be available in April.

Since you are registering before the June 1st
Early Registration date, you qualify for our
discounted price:

\$100 for one child/\$125 for two or more

Amount Due: _____ Amount Rec'd _____

☐ Check # _____ ☐ Cash ☐ E Giving

Payment Date _____ Rec'd. by _____

*Please Make Checks Payable to
St. Michael FLT*

**FLT TUITION PAYMENT IS
EXPECTED WITH REGISTRATION**

OVER →

Can you help?

A Summer FLT Program takes a lot of volunteers. If you are interested in helping, please let us know. It's a great way to be an active participant in your child's religious education.

- | | |
|--|---|
| <input type="checkbox"/> Catechist | <input type="checkbox"/> Religious Education Commission |
| <input type="checkbox"/> Building Supervisor | <input type="checkbox"/> General Help As Needed |

Meds, Learning or physical disabilities, class request information, custodial issues:

It is expected that our FLT Families are registered, active, participating and contributing members of our Parish. I give permission for my child/ren to be videotaped or photographed for parish use such as bulletin boards, the Messenger, parish gatherings or the website. (Names will not be used.)

Parent/Guardian Information (Required)

Parent's Name _____

Signature _____

Parent's Name _____

Signature _____

Family Information

Family Last Name _____

Father's Name _____ Mother's Name _____

Cell # _____ Cell # _____

Address _____

Office # _____ Office # _____

City, State, ZIP _____

E-Mail Address: _____

(_____) _____ ☐ unlisted
HOME PHONE (Including Area Code)

☐ We have other students in the FLT Program.

You will receive a separate registration form for any children in Grades 6 & 7, Grades 1 through 5, and Sunday School in April.