

**OUR LADY OF LEBANON MARONITE CHILDREN ORGANIZATION
FOR STUDENTS IN GRADES KINDERGARTEN – 5TH
REGISTRATION FORM FOR THE YEAR 2017-2018**

Please fill out one form per Participant

_____	_____	_____
Last Name	First Name	MI
_____	_____	_____
Date of Birth	Age	Sex
_____	_____	_____
Address	City	Zip Code
_____	_____	_____
Participant Phone Number	Email Address	Facebook
As of Fall 2017, I will be entering _____ Grade		T-Shirt Size: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large
I am willing to Serve in the Divine Liturgy as:		
Choir _____	Lector _____	Altar Server _____
Usher _____	Greeter _____	Media _____
		Offering of Gifts _____
		Other (please specify) _____
Do you play an Instrument: YES _____ NO _____		If YES, please specify: _____
Talents:		
OLL Parishioners Yes ____ No ____	FATHER	MOTHER
Name	_____	_____
Home Phone	_____	_____
Work or Cell Phone	_____	_____
Religion	_____	_____
Email	_____	_____
Address (if different from above)	_____	_____

Participant Signature: _____

Parent Signature: _____

Date: _____

Fees: \$35.00 per Participant

Web site: www.olol-sf.org

Email: ourladyol.sf@gmail.com