

St. Michael the Archangel Parish  
**Our Little One's Worship Program**

Registration Form 2011-2012

OLOW is for children 3 years of age by 9/01/11 through Pre-kindergarten

**Family Information**

Parent's name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address \_\_\_\_\_  
 E-Mail \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Registration Information**

Name of Child	Preferred Name <small>(if applicable for nametag)</small>	Sex	Birth Date	Preferred Mass <small>(5pm Sat; 9 or 10:30am Sun)</small>
1. _____	_____	M/F	_____	_____
2. _____	_____	M/F	_____	_____
3. _____	_____	M/F	_____	_____

**Food Allergy and Special Need Information**

Occasionally, snacks will be served so we need to be aware of any food allergies your child has.

Name of Child	Allergy <small>(please indicate "none" if no allergies)</small>	Reaction	Other Special Needs
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

**Registration Fee**

- Registration Fee is \$30 per child for the entire year. Please make checks payable to St. Michael the Archangel 14251 Nall Ave. Leawood, KS 66223.
- Please note: The registration fee is waived for teachers and craft coordinators. Please consider sharing your time and teach this year.

For Official Use Only

Date Received	Check Number	Amount	Shelby	Class