

Catechesis of the Good Shepherd Ministry

Parent Interest Form

Family Name: _____

Child's given name and age

1. _____

2. _____

3. _____

Contact information

Phone number: _____

Email: _____

Choose preferred time: (eg. 1 (first choice) 2 (second choice) etc.)

Monday: 4:00pm to 5:30pm _____
4:30pm to 6:00pm _____

Tuesday: 4:00pm to 5:30pm _____
4:30pm to 6:00pm _____

Wednesday: 4:00pm to 5:30pm _____
4:30pm to 6:00pm _____

Thursday: 4:00pm to 5:30pm _____
4:30pm to 6:00pm _____

Saturday: 9:30am to 11:00 am _____

Other: (Suggestion) _____

Comments: _____

