St. Patrick PREP 131 Channing Avenue Malvern, PA 19355

Email: _____ Phone Number: _____

Name of your child or children :

PREP Level

_____PREP Level_____

PREP Level	

- I agree that I will be the Catechist to my child(ren) and will take the responsibility to teach the curriculum of St. Patrick Religious Education Program to them.
- I agree to attend and participate with my children in the 7 in-person parent sessions/child classes at St. Patrick Parish for the *Family Catechesis* program.
- I agree to complete and return any follow-up material required and/or any evaluations required as a participating family in the program.
- I understand that if I choose not to fulfill the requirements to participate in the Family Catechesis option, it will result in my child(ren) being placed back in the traditional weekly PREP classes.

Signature of Parent: ______Date: _____Date: _____Date: ______Date: ______Date: ______Date: ______Date: ______Date: ______Date: ______Date: _____Date: ______Date: ______Date: ______Date: ______Date: _____Date: _____Date:

(This form must be signed and returned with your PREP registration. You may not request this option over the phone or by e-mail. You must sign your agreement to participate. Thank you.)