



天主教聖曹桂英堂

**St. Agnes Kouying Tsao Catholic Church**

2130 Rodick Road, Markham, Ontario, Canada L6C 1S7

Telephone: (905) 887-7922 Fax: (905) 887-7933

E-mail: sundayschool.satcc@gmail.com

## Application for Sunday School 2025 - 2026 (Liturgy of the Word with Children)

### A) Student Information:

First Name:	Last Name:
Baptism Name:	Male <input type="checkbox"/> Female <input type="checkbox"/>
Date of Birth ____/____/____ (mm/dd/yy)	Date of Baptism ____/____/____ (mm/dd/yy)
Address _____ City _____ Province: ON Postal Code _____	
Current School:	Grade Level in September:
Has applicant received First Communion? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Does applicant has any allergy or medical concern? Yes <input type="checkbox"/> No <input type="checkbox"/> (If Yes, please specify)	

### B) Parent/Guardian's Information:

<b>S.A.T.C.C. Parish Registration #</b>		
<b>Father</b>	<b>Mother</b>	<b>Guardian, if any</b>
Name:	Name:	Name:
Email:	Email:	Email:
Cell:	Cell:	Cell:

### C) Please choose (✓) ONE time-slot and Level:

		Saturday 4:30 p.m.	Sunday 8:15 a.m.	Sunday 10 a.m.	Sunday 12 p.m.
		Class starts Sept.6	Class starts Sept.7		
<b>Junior</b>	<b>Age 4-6</b>				
<b>Intermediate</b>	<b>Age 7-9</b>				
<b>Senior</b>	<b>Age 10-12</b>				

Form submitted by:

Name of Parent/Guardian: (Print) \_\_\_\_\_ (Sign) \_\_\_\_\_ Date \_\_\_\_\_

**Note:** 1. \$25 **Non-refundable** fee is payable upon registration

2. Photocopy of applicant's Certificates of Baptism and First Communion are required for all new applications. (where applicable).

For Registration Team use only	Fee Received: Cash( ) Cheque ( ) #	Note:
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