

**ST. MAXIMILIAN KOLBE PARISH OFFICE OF RELIGIOUS EDUCATION**

**Parental Permission Form**

**2026-2027**

Parents, please complete this form indicating who will be responsible for picking your child/ren up each week after class. Please complete a box for each of your children. Thanks.

Child's Name: \_\_\_\_\_ Level: \_\_\_\_\_ Room #: \_\_\_\_\_

Person/s responsible for picking my child up at dismissal: Name: _____ Phone #: _____ Name: _____ Phone #: _____ If there is a change in this, please notify your child's catechist. Thank you! Child's Name: _____ Level: _____ Room #: _____
--

Person/s responsible for picking my child up at dismissal: Name: _____ Phone #: _____ Name: _____ Phone #: _____ If there is a change in this, please notify your child's catechist. Thank you! Child's Name: _____ Level: _____ Room #: _____
--

Person/s responsible for picking my child up at dismissal: Name: _____ Phone #: _____ Name: _____ Phone #: _____ If there is a change in this, please notify your child's catechist. Thank you! Child's Name: _____ Level: _____ Room #: _____
--

**Concerning photographs ...**

I GIVE MY CHILD/REN PERMISSION TO BE PHOTOGRAPHED IN CLASS. PHOTOS MAY BE VIEWED ON FACEBOOK OR THE PARISH WEBSITE.

I PREFER MY CHILD/REN NOT BE PHOTOGRAPHED IN CLASS.

Parent Signature: \_\_\_\_\_