



Catechesis of the Good Shepherd Association of Canada

Charity BN/Registration No.: 82725 0945 RR0001

2020 Membership Registration Form & Annual Appeal

Our Mission: to assist the involvement of adults and children in a common religious experience in which the religious values of childhood, especially those of contemplation and enjoyment of God, predominate.

Thank you for your support of the Catechesis of the Good Shepherd Association of Canada!

Please indicate: New Member ☐ Renewal ☐ Already a 2020 Member: ☐ # _____

Membership Fee: Member @ \$40.00/year ☐ **OR** \$80.00/2 years ☐

Limited income Member @ \$25.00/year ☐

**Optional Fee for hard copy newsletters @ \$10.00/year ☐

*membership fees are not considered a charitable donation by the Canada Revenue Agency

In addition, please consider a tax deductible donation to support formation & scholarships:

Supporting Member \$100.00 ☐

Contributing Member \$500.00 ☐

Other Amount \$_____ ☐

With Thanks!

TOTAL AMOUNT ENCLOSED :

OR PAID by PayPal:

(Membership is valid upon receipt of payment)

Connect to PayPal at cgsac.ca

MEMBER INFORMATION:

Please provide or update information as required, printing legibly.

Name Birth Date (D/M/Y).....

Street Address

Town/City Province Postal Code

Phone # (Home)..... Daytime Contact Phone #.....

****E-mail address is required for access to Members section of cgsac.ca and to receive the newsletter. Your signature gives us permission to contact you by email. If you wish to receive paper copies of all newsletters, please add the **\$10 indicated above to your membership fee.**

Email address: Religious affiliation

Parish: If currently involved in an Atrium, which one?.....

Location:..... Is there an Atrium website?:

If not a catechist, relationship to CGS? Signature:

**Please make cheques payable to 'CGSAC' or
'The Catechesis of the Good Shepherd Association of Canada'**

Send this form with your cheque or money order to:

CGSAC

Re: Membership

15334 Argyll Rd

Georgetown, ON L7G 5P3

This Membership valid from date of receipt thru December 31, 2020.

OFFICE USE ONLY:

Date Received:

Member Number:

Amount Paid:Cash or FICHQ #

Date & # of Member receipt:

Date & # of Tax receipt:

Date of Updates to: Database:

MailChimp..... Web access:

New members please complete reverse side. Renewing members, add updates only.

****If you have completed course information previously, please add updates only!***

YOUR COMMENTS: We believe in collaboration, and growing the CGS throughout Canada. Please share with us anything we should know, can do for you, or how you can help to realize this vision:

FORMATION COURSES COMPLETED

LEVEL I (3-6 year old) :

Town/City Prov/State Date completed course:

Formation Leader (s)

Album completed: "still a work in progress" ☐ or Yes ☐ Reviewed by:.....

Date album completed Date album reviewed:.....

Observation of children in a Montessori environment 3-6 years: Yes ☐ Where?..... No ☐

Number of years in atrium as Level I catechist: Atrium name/location:

LEVEL II (6-9 year old) :

Town/City Prov/State Date completed course:

Formation Leader (s)

Album completed: "still a work in progress" ☐ or Yes ☐ Reviewed by:.....

Date album completed Date album reviewed:.....

Observation of children in a Montessori environment 6-9 years: Yes ☐ Where?..... No ☐

Number of years in atrium as Level II catechist: Atrium name/location:

LEVEL III (9-12 year old) :

Town/City Prov/State Date completed course:

Formation Leader (s)

Album completed: "still a work in progress" ☐ or Yes ☐ Reviewed by:.....

Date album completed Date album reviewed:.....

Observation of children in a Montessori environment 9-12 years: Yes ☐ Where?..... No ☐

Number of years in atrium as Level III catechist: Atrium name/location:

FURTHER TRAINING: List workshops, courses or retreats that have helped you in your CGS formation:

Date:.....Workshop/Retreat/Course:.....

Date:.....Workshop/Retreat/Course:.....

Date:.....Workshop/Retreat/Course:.....