

Religious Education Family Registration Form

Last name _____ Parents' First names _____

Address _____

Phone number(s) _____

Email address _____ I email parents regularly. This is very important information if you have an email you check regularly. Please print clearly.

Would parent be willing to teach or be a substitute? _____

Fee \$25 per child (maximum \$60 per family) amount paid _____

I have read and agree to be governed by the religious ed handbook _____

(Parent signature)

Child's name _____ current grade in school _____

Birth date _____ Where was child baptized? _____

Circle other Sacraments child has received: Reconciliation Communion Confirmation

Allergies or medical conditions _____

Child's name _____ current grade in school _____

Birth date _____ Where was child baptized? _____

Circle other Sacraments child has received: Reconciliation Communion Confirmation

Allergies or medical conditions _____

Child's name _____ current grade in school _____

Birth date _____ Where was child baptized? _____

Circle other Sacraments child has received: Reconciliation Communion Confirmation

Allergies or medical conditions _____

*****For more than 3 children, please continue on the back of the page.