

## Religious Education Registration-one per child

Child's Name \_\_\_\_\_  
 Child's Address \_\_\_\_\_  
 Child's Cell Phone (optional) \_\_\_\_\_  
 Child's Birthdate \_\_\_\_\_  
 Allergies or medical conditions \_\_\_\_\_  
 \_\_\_\_\_

Father's Name \_\_\_\_\_  
 Address (if different) \_\_\_\_\_  
 \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Place of Employment \_\_\_\_\_  
 Religion \_\_\_\_\_

Mother's Name \_\_\_\_\_  
 Address (if different) \_\_\_\_\_  
 \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Place of Employment \_\_\_\_\_  
 Religion \_\_\_\_\_

Sacrament	Date	Location
Baptism		
Communion		
Confirmation		

My child has permission to be contacted on their cell phone \_\_\_\_\_yes \_\_\_\_\_no

My child has permission to be photographed \_\_\_\_\_yes \_\_\_\_\_no

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

\_\_\_\_\_ 2018 \_\_\_\_\_ 2019 \_\_\_\_\_ 2020 \_\_\_\_\_ 2021 \_\_\_\_\_ 2022 \_\_\_\_\_ 2023  
 pd

\_\_\_\_\_ Grade \_\_\_\_\_ Grade \_\_\_\_\_ Grade \_\_\_\_\_ Grade \_\_\_\_\_ Grade