

ST. JOSEPH RELIGIOUS EDUCATION REGISTRATION FORM 2022-2023

P.O. BOX 7005, 1303 MENDON ROAD, CUMBERLAND, RHODE ISLAND 02864
(401) 333-4014

Please list the names of your children and their NEXT SCHOOL GRADE in Religious Education. Please indicate, if your child's surname is different.

PLEASE PRINT CLEARLY

Last Name, First Name	Please Circle	Age	Date/Place of Birth	Grade In fall/school
-----------------------	---------------	-----	---------------------	----------------------

1. _____ Male/Female _____

1Jan2008/Prov, RI

Gr 1, Garvin

2. _____ Male/Female _____

3. _____ Male/Female _____

4. _____ Male/Female _____

Father's Name

First

Middle

Last

Mother's Name:_____ (_____)

First

Middle

Last

Maiden

Address: _____ **Town/State/Zip** _____

Mother's Home Ph: _____ **Cell Ph:** _____ **Work Ph:** _____

Father's Home Ph: _____ **Cell Ph :** _____ **Work Ph:** _____

Email address: _____

Please indicate Emergency method of getting a hold of you: cell/work/home/email_____

If student does not live with both parents, please indicate with whom he/she is living

SPECIAL NEEDS - EXAMPLE: Medical, allergies or learning? Please explain:

BAPTISM DATE/PLACE	FIRST COMMUNION DATE/PLACE
---------------------------	-----------------------------------

Additional space on back of form

GRADES 1 -6

BIRTH CERTIFICATE (COPY)

BAPTISMAL RECORD NEEDED

FEE: \$60.00 PER CHILD

GRADES 7-10

BIRTH CERTIFICATE (COPY)

BAPTISMAL RECORD NEEDED

FIRST COMMUNION RECORD NEEDED

FEE: 100.00 PER CHILD

(INCLUDES RETREAT FEE)

Do not write below this line

For Official Use Only

Date	Amount
------	--------

Cash: _____ **Check** _____

Child's Name_____

Special Needs _____

BAPTISM DATE/PLACE_____

FIRST COMMUNION DATE/PLACE_____

Child's Name_____

Special Needs _____

BAPTISM DATE/PLACE_____

FIRST COMMUNION DATE/PLACE_____

Child's Name_____

Special Needs _____

BAPTISM DATE/PLACE_____

FIRST COMMUNION DATE/PLACE_____

Child's Name_____

Special Needs _____

BAPTISM DATE/PLACE_____

FIRST COMMUNION DATE/PLACE_____

COMMENTS: _____
