

Registration Fee: \$20 per child/Maximum Family Fee \$50

FAMILY NAME _____

ADDRESS _____

TEL # _____ **E-MAIL** _____

Parents'/Guardians' Names _____

Emergency Contact Name & Tel # _____

Last year my child/children attended religious education at _____ Parish.

Please circle the appropriate sacrament, if any:

I desire: Baptism First Reconciliation First Eucharist for my child/children.

Child's Name _____

Date of Birth _____ Entering Grade in Sept. 2023 _____

Date & Place of Baptism _____

Date & Place of First Communion _____

Does this child have any allergies, medical conditions, learning challenges that the teacher should know about in order to help your child do their best work this year?

Child's Name _____

Date of Birth _____ Entering Grade in Sept. 2023 _____

Date & Place of Baptism _____

Date & Place of First Communion _____

Does this child have any allergies, medical conditions, learning challenges that the teacher should know about in order to help your child do their best work this year?

Child's Name _____

Date of Birth _____ Entering Grade in Sept. 2023 _____

Date & Place of Baptism _____

Date & Place of First Communion _____

Does this child have any allergies, medical conditions, learning challenges that the teacher should know about in order to help your child do their best work this year?

Child's Name _____

Date of Birth _____ Entering Grade in Sept. 2023 _____

Date & Place of Baptism _____

Date & Place of First Communion _____

Does this child have any allergies, medical conditions, learning challenges that the teacher should know about in order to help your child do their best work this year?

Child's Name _____

Date of Birth _____ Entering Grade in Sept. 2023 _____

Date & Place of Baptism _____

Date & Place of First Communion _____

Does this child have any allergies, medical conditions, learning challenges that the teacher should know about in order to help your child do their best work this year?
