

**SS. Andrew-Thomas/St. Charles  
Kindergarten through 8<sup>th</sup> Grade  
Religious Education Registration Form**

**Child(ren) Name(s)**                      **Parish:** \_\_\_\_\_

First	Middle	Last	Birth Date	Grade	Gender M / F	Sacraments Received		
						Baptism	Penance	Eucharist
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Father** First / Last Name:

**Mother** First / Last Name:

Address/City/State/Zip:

Address/City/State/Zip:

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone\*: \_\_\_\_\_

Cell Phone\*: \_\_\_\_\_

\*A phone number, in which you can be reached during class periods, is required.

Father Email Address\*:

Mother Email Address\*:

\_\_\_\_\_  
\*\*Please print legibly - this will be our primary form of communication.

**Registration Fee \$60 for 1<sup>st</sup> child:**

**\$90 for two children:**

**\$120 for 3+ children:**

All checks payable to **SS Andrew-Thomas.**

OFFICE USE ONLY: ☐ Paid / Date: \_\_\_\_\_ and Check # \_\_\_\_\_