St. Michael the Archangel Catholic Church

Religious Education Registration

PO Box 1498; 15405 Hwy 90 · Paradis, LA 70080

Religious Education Coordinator: Suzanne Miller

Term: 2025-2026

FAMILY INFORMATION

Family Last Name:	Date:
Father's Name:	Father's Cell:
Mother's Name:	Mother's Cell:
Mother's Maiden:	Email Address:
Home Phone:	Emergency Contact:
Home Address:	Emergency Phone:
City, ST, Postal:	Both Parents Catholic: ☐ Yes ☐ No

STUDENT #1 INFORMATION

Child Name: _____   Grade: _____   Catholic: ☐ Yes ☐ No

Gender: ☐ Male ☐ Female

Birth Date: _____

Special Needs (Medical / Allergies, Learning Disability, Physical Disability, Etc.) List Below:

_____

Sacrament Details   Check & Date All Below

(Must provide church sacrament was received and provide copy)

☐ Baptism: _____
☐ Reconciliation: _____
☐ Eucharist: _____
☐ Confirmation: _____

STUDENT #2 INFORMATION

Child Name: _____   Grade: _____   Catholic: ☐ Yes ☐ No

Gender: ☐ Male ☐ Female

Birth Date: _____

Special Needs (Medical / Allergies, Learning Disability, Physical Disability, Etc.) List Below:

_____

Sacrament Details   Check & Date All Below

(Must provide church sacrament was received and provide copy)

☐ Baptism: _____
☐ Reconciliation: _____
☐ Eucharist: _____
☐ Confirmation: _____

STUDENT #3 INFORMATION

Child Name: _____   Grade: _____   Catholic: ☐ Yes ☐ No

Gender: ☐ Male ☐ Female

Birth Date: _____

Special Needs (Medical / Allergies, Learning Disability, Physical Disability, Etc.) List Below:

_____

Sacrament Details   Check & Date All Below

(Must provide church sacrament was received and provide copy)

☐ Baptism: _____
☐ Reconciliation: _____
☐ Eucharist: _____
☐ Confirmation: _____

NOTE: If any of your children were baptized outside of this parish, and you have not already supplied us with a copy of each child's baptismal record, you will need to supply a copy for our files.
Forms should be returned to St. Michael Rectory or church collection and returned as soon as possible.

OFFICE USE ONLY: ☐ Single Fee $60 / ☐ Family Fee $75 / ☐ Confirmation $50		Tuition Due: $
Installment No. 1: $	Installment No. 2: $	Installment No. 3: $
Date Paid: ☐ Cash or Check No.	Date Paid: ☐ Cash or Check No.	Date Paid: ☐ Cash or Check No.
	Received By:	