

# RELIGIOUS EDUCATION PROGRAM REGISTRATION APPLICATION

FIRST NAME (CHILD'S LEGAL NAME)		MIDDLE	LAST NAME	
STREET ADDRESS		CITY	STATE	ZIP
TELEPHONE NUMBER		DATE OF BIRTH (PLEASE ATTACH BIRTH CERTIFICATE)		
SCHOOL CURRENTLY ATTENDING			GRADE	
FIRST NAME (FATHER'S LEGAL NAME)		MIDDLE	LAST NAME	
FIRST NAME (MOTHER'S LEGAL NAME)		MIDDLE	LAST NAME	
<b>IN CASE OF AN EMERGENCY OR ILLNESS PLEASE NOTIFY:</b>				
FIRST NAME		MIDDLE	LAST NAME	
STREET ADDRESS		CITY	STATE	ZIP
HOME PHONE		CELL PHONE		
PLEASE DESCRIBE ANY MEDICAL CONDITIONS/ALLERGIES THAT WE NEED TO BE AWARE OF:				
<b>RELIGIOUS EDUCATION INFORMATION</b>				
HAS YOUR CHILD ATTENDED PRIOR RELIGIOUS EDUCATION CLASSES? <input type="checkbox"/> YES <input type="checkbox"/> NO				
IF YES, WHAT GRADE?		NAME OF CHURCH:		
HAS YOUR CHILD RECEIVED THE SACRAMENT OF BAPTISM? <input type="checkbox"/> YES <input type="checkbox"/> NO				
CHURCH OF BAPTISM		DATE OF BAPTISM (PLEASE ATTACH BAPTISM CERTIFICATE)		
HAS YOUR CHILD RECEIVED THE SACRAMENT OF FIRST CONFESSION? <input type="checkbox"/> YES <input type="checkbox"/> NO				
CHURCH OF FIRST CONFESSION		DATE OF FIRST CONFESSION		
HAS YOUR CHILD RECEIVED THE SACRAMENT OF FIRST COMMUNION? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, PLEASE ATTACH 1ST COMMUNION CERTIFICATE)				
IF NO, HAS YOUR CHILD ATTENDED THE FIRST YEAR FIRST COMMUNION? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF NO, PLEASE ATTACH COMPLETION CERTIFICATE)				
CHURCH OF FIRST COMMUNION		DATE OF FIRST COMMUNION		
HAS YOUR CHILD ATTENDED 1 <sup>ST</sup> YEAR CONFIRMATION? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF YES, PLEASE ATTACH COMPLETION CERTIFICATE)				
IF YES, PLEASE FILL OUT WHERE AND WHEN YOUR CHILD ATTENDED THEIR 1ST YEAR CONFIRMATION				
NAME OF CHURCH OF 1ST YEAR CONFIRMATION		DATE OF 1ST YEAR CONFIRMATION		
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<b>FOR OFFICE USE ONLY:</b>				
<b>TUITION FEE:</b>	\$75.00 GRADES 1-9	\$100.00 1 <sup>ST</sup> YEAR CONFIRMATION	\$100.00 2 <sup>ND</sup> YEAR CONFIRMATION	\$100.00 RCIA
AMOUNT PAID: \$	CASH/CHECK #	BALANCE: \$	BAPTISM CERTIFICATE REC'D? <input type="checkbox"/> YES <input type="checkbox"/> NO	
RELIGIOUS EDUCATION CLASS/SACRAMENT:			TEACHER:	
ASSESED BY:			DATE:	