

St. Francis Religious Education Form 2019-2020

67 West Town Street
Lebanon, CT 06249
Phone (860) 642-6711

For 1 Child
Please Print Legibly

REGISTRATION FOR FAITH FORMATION CLASSES (Grades 1-8)

Date: _____ Grade: _____
(For school year 2019-2020)

Student's Name: _____
 First Initial Last

Address: _____
 Street City

State: _____ Zip Code: _____

1st Contact Person: () Father () Mother Other _____

Mr., Ms, Mrs., Dr, etc. First Last Sr., Jr., etc.

Home Phone: _____ Work Phone: _____ Cell Phone: _____

2nd Contact Person: () Father () Mother Other _____

Mr., Ms, Mrs., Dr, etc. First Last Sr., Jr., etc.

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Student's Mothers Maiden Name: _____
 Last Name

+++ All mail and e-mail will be addressed to the 1st Contact Person +++

E-Mail Address: _____

Emergency Contact Person: _____ Phone: _____
(If Parents not available)

Gender: () Boy () Girl

Student's Birth Date: _____ Birthplace: _____
 City State

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Students Sacramental Information:

Baptized:

() YES () NO _____
Date Church City State

Made 1st Confession:

() YES () NO _____
Date Church City State

Made 1st Communion:

() YES () NO _____
Date Church City State

Student's Parents: Married () Divorced () Single Parent ()

Mother's Religion: _____ Father's Religion: _____

Biological Mother Deceased: () Biological Father Deceased: ()

Biological Father's Name: _____

Biological Mother's Maiden Name: _____

Are there any medical or learning disabilities we should know about in order to teach your child more effectively?

Parent or Guardian's signature: _____

REGISTRATION FEE = \$60.00 Two Children = 120.00 Three + children = \$160.

LATE REGISTRATION FEE = PLUS \$15.00 PER CHILD AFTER August 1, 2019

If there are financial difficulties or problems with the fees, please call Jim Hay or Fr. Mark at 642-6711 for a waiver.

Checks may be made payable to St Francis of Assisi Church and returned with your registration form

For office use only:

Cash: Amount \$ _____

Date Received _____

Check Number _____

Time: _____