

**ANNUNCIATION RELIGIOUS EDUCATION  
REGISTRATION  
2020-2021**

togetherinfaith@gmail.com

FOR OFFICE USE ONLY	
<input type="checkbox"/>	New Registration
<input type="checkbox"/>	Re-Registration
<input type="checkbox"/>	Earthquake/Emergency

Date of Registration \_\_\_\_\_

\_\_\_\_\_  
Last Name Home # Work# Cell#

\_\_\_\_\_  
Mailing Address City State Zip email address

\_\_\_\_\_  
Father's First Name Last Name Religion Cell# Home# Work#

\_\_\_\_\_  
Mother's First Name Last Name Religion Cell# Home# Work#

\_\_\_\_\_  
Guardian's First Name Last Name Religion Cell# Home# Work#

\_\_\_\_\_  
Name (in case of emergency) Relationship Cell# Home# Work#

Do both parents live at home? \_\_\_\_\_ Yes \_\_\_\_\_ No If not, who do the children live with? \_\_\_\_\_

Registered in Parish? \_\_\_\_\_ Yes \_\_\_\_\_ No Language spoken at home? \_\_\_\_\_

Name of Child	Gender	School Attending	Grade	Birth Date	Baptism Yes/No	Penance Yes/No	Communion Yes/No	Last Grade of Religious Ed.	Grade of Religious Education	Baptism Verified	Communion Verified

Please indicate any physical or learning disability -  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_