

**RELIGIOUS EDUCATION**  
**REGISTRATION FORM- NEW STUDENTS ONLY**  
**Pre-K through Grade 8**  
***This form may be duplicated. One form for each child.***

SESSION PREFERENCE (Pre-K through 2nd grades only) - **SUNDAY** \_\_\_\_\_ (9:30-10:30am)  
(3rd grade through 8th grade) - **MONDAY** \_\_\_\_\_ (6:45-8:00pm)

Student Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Grade in Religious Ed \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone Number home# \_\_\_\_\_ wk# \_\_\_\_\_ cell# \_\_\_\_\_

Present School \_\_\_\_\_ Grade \_\_\_\_\_

Number of years in Religious Education \_\_\_\_\_ Any Medications? \_\_\_\_\_

Does this child have any learning disabilities, or is he/she enrolled in any special class of which we should be aware? \_\_\_\_ YES \_\_\_\_ NO Please specify \_\_\_\_\_

Sacraments received: \_\_\_\_\_ Baptism \_\_\_\_\_ Penance \_\_\_\_\_ Eucharist \_\_\_\_\_

\*\*\*\*\*

**PARENT/GUARDIAN INFORMATION**

Name of person(s) with whom student currently resides.  
(If last name different from that of child, please include)

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_

Present status of family: \_\_\_\_\_ Both Parents  
\_\_\_\_\_ Parent/Step-parent  
\_\_\_\_\_ Single Parent

\*\*\*\*\*

**FOR OFFICE USE ONLY:**

Fees Due: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

Payment Date: \_\_\_\_\_