

## St. Peter Church Religious Education Registration 2021-2022

Father's Name: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mother's Cell Phone: \_\_\_\_\_

Custodial Home Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

If divorced, do both parents have legal custody? Y / N Children reside with: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_ \*\*

**\*\*Communication for our RE families will be done through email\*\* please print clearly**

**Home Information:** Please check appropriate boxes

Married living with both parents  Father remarried  Parents Separated

Mother remarried  Parents Divorced  Parent deceased

Personal or custodial issues: \_\_\_\_\_

Language(s) spoken by : Mother: \_\_\_\_\_ Father: \_\_\_\_\_

**Emergency Contact:** Name & phone number: \_\_\_\_\_

Second name & phone number: \_\_\_\_\_

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**Parish Status:** Are you an active, registered family attending Mass at St. Peter Church & using your parish envelopes weekly? Yes / No

If no, with what Parish are you registered? \_\_\_\_\_

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### Registration and Tuition:

\*\*Parents, in the current situation, all forms and payment must be received by **August 27, 2021** in order for us to order the books. We cannot accept any late registrations.

**1 child:** \$75    **2 children:** \$100    **3 children:** \$150

**Baptismal Certificate:** Parish **must** have a copy of Baptism Certificate before child is able to attend class.

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### Student #1 Information:

Child's Name: \_\_\_\_\_ Male/Female Date of Birth: \_\_\_\_\_

Name of School: \_\_\_\_\_ Grade (fall 2021-22): \_\_\_\_\_

Allergies, medical conditions, physical limitations, special needs or learning disabilities for the RE Director? \_\_\_\_\_

**Sacraments received:** Baptism:  Reconciliation:  First Communion:  Confirmation:

### Student #2 Information:

Child's Name: \_\_\_\_\_ Male/Female Date of Birth: \_\_\_\_\_

Name of School: \_\_\_\_\_ Grade (fall 2021-22): \_\_\_\_\_

Allergies, medical conditions, physical limitations, special needs or learning disabilities for the RE Director? \_\_\_\_\_

**Sacraments received:** Baptism:  Reconciliation:  First Communion:  Confirmation:

**Office use only:**

Registration form

Baptism Cert.

Pmt.  Cash  Check

**Please list additional children on the back →→**

**Student #3 Information:**

Child's Name: \_\_\_\_\_ Male/Female Date of Birth: \_\_\_\_\_

Name of School: \_\_\_\_\_ Grade (fall 2021-2022): \_\_\_\_\_

Allergies, medical conditions, physical limitations, special needs or learning disabilities for the RE Director?

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**Sacraments received:** Baptism:  Reconciliation:  First Communion:  Confirmation: