

St. Anthony de Padua Catholic Parish

Religious Education Registration Form

Fees: \$30 per student / \$100 for families of 4 or more children; payment plans available

Family Information – Please print and write carefully

Father's Name: _____

Religion: _____

Mother's Name: _____

Religion: _____

Preferred Mailing Address: _____

City _____ **State** _____ **Zip Code** _____

Home Phone: _____

Mobile Phone (circle) Mom / Dad : _____

I give permission to text above number (circle) YES NO

Preferred Email(s): _____

Parents are (circle) Married (skip to next section) Separated (fill out below)

Child(ren) live with: _____

If separated, please give any additional notes that may be necessary:

Is your family registered and active parishioners? (circle) YES NO

Is this your family's first year in St. Anthony's Religious Ed? YES NO

Emergency Contact Information

Please list two emergency contacts if parent(s) cannot be reached:

Name: _____ Cell number: _____

Relationship to child(ren): _____

Name: _____ Cell number: _____

Relationship to child(ren): _____

For office use only:

Date received:

Amount paid:

Check #:

Cash

Baptismal certificate:

Student Information

Child's Name: _____ Male Female

Grade Fall 2018: _____ Date of Birth _____

School: _____

Has this child been baptized? YES NO Baptized Catholic? YES NO

Has this child received First Reconciliation? YES NO

Has this child received First Communion? YES NO

Has this child received Confirmation? YES NO

Is there any other information about your child that you think we should be aware of, like matters regarding health, safety, or special circumstances involving their sacraments? If so, please explain. This information will be made available to your child's teacher.

Child's Name: _____ Male Female

Grade Fall 2018: _____ Date of Birth _____

School: _____

Has this child been baptized? YES NO Baptized Catholic? YES NO

Has this child received First Reconciliation? YES NO

Has this child received First Communion? YES NO

Has this child received Confirmation? YES NO

Is there any other information about your child that you think we should be aware of, which may be relevant to your child's healthy and safety, or the health and safety of others? If so, explain. This information will be made available to your child's teacher.

Child's Name: _____ Male Female

Grade Fall 2018: _____ Date of Birth _____

School: _____

Has this child been baptized? YES NO Baptized Catholic? YES NO

Has this child received First Reconciliation? YES NO

Has this child received First Communion? YES NO

Has this child received Confirmation? YES NO

Is there any other information about your child that you think we should be aware of, like matters regarding health, safety, or special circumstances involving their sacraments? If so, please explain. This information will be made available to your child's teacher.

Child's Name: _____ Male Female

Grade Fall 2018: _____ Date of Birth _____

School: _____

Has this child been baptized? YES NO Baptized Catholic? YES NO

Has this child received First Reconciliation? YES NO

Has this child received First Communion? YES NO

Has this child received Confirmation? YES NO

Is there any other information about your child that you think we should be aware of, which may be relevant to your child's healthy and safety, or the health and safety of others? If so, explain. This information will be made available to your child's teacher.