

*Religious Education Registration
School Year 2008-2009*

Child's Name _____

Family Name _____

Age _____ DOB _____ Grade _____

SACRAMENTS RECEIVED

Catholic Baptism: YES ___ No ___ Date _____ Parish _____

Eucharist: YES ___ No ___ Date _____ Parish _____

Confirmation: YES ___ No ___ Date _____ Parish _____

Parent/Guardian Name _____

Current Address _____

Email Address _____

Current Phone Hm. _____ Wk. _____ Cell _____

Are there any problems or disabilities that we need to be aware of?

In case of emergency, please notify:

1st Choice _____ Phone _____

2nd Choice _____ Phone _____