



# St. Joseph's Catholic Church

Office of Religious Education  
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## 2009-2010 CATHOLIC SCHOOL STUDENT INFORMATION FORM

Mother's Full Name: \_\_\_\_\_ Father's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone(home): \_\_\_\_\_ Cell Phone #: Mother's \_\_\_\_\_ Father's \_\_\_\_\_

E-Mail Address(es): \_\_\_\_\_ (we will be communicating through email & website only)

Child(ren)'s Full Name(s)	Gender	Date of Birth	Grade in September	School Attending
_____	M/F	_____	_____	_____
_____	M/F	_____	_____	_____
_____	M/F	_____	_____	_____
_____	M/F	_____	_____	_____
_____	M/F	_____	_____	_____

**Check off any that apply. Please read this section carefully. It is critical that it be completed accurately for it will determine how and when your child(ren) will receive the sacraments.**

- My child(ren) have been baptized in the Catholic Church. (All children, even if baptized at St. Joseph's Church, must have copies of their Baptismal certificates on file in the religious education office. Please attach to form if you have not already submitted.)
- If older than 2<sup>nd</sup> grade, my child(ren) has/have received First Penance and First Communion. (Any child who did not receive First Penance and/or First Communion at St. Joseph's Church must have a copy of his/her First Penance and/or First Communion certificate/s on file in the religious education office. Please attach to form if you have not already submitted.)
- If older than 1<sup>st</sup> grade and registering as a new Catholic School student, my child(ren)'s previous religious education records have been submitted from our previous parish and show continuous participation of religious education from 1<sup>st</sup> grade to current grade of enrollment.

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Our family is registered as members of St. Joseph's Church. Registration at St. Joseph's Church is required for children to receive sacraments here.

My child(ren) has/have no special needs in learning.

Please indicate any special needs of which we need to be aware, including if the child/ren does/do not live with both parents: \_\_\_\_\_

The following language(s), in addition to English, is/are spoken in our home: \_\_\_\_\_

**Continued on Back**

## Emergency Information

### Please Print:

Health concerns/allergies of each child: \_\_\_\_\_

In case your child is ill and we are unable to contact the parents, please provide the name of a relative or friend whom we may call. Please list someone who is within 5-10 minute driving distance.

Emergency Contact Name: \_\_\_\_\_ (contact should not be a parent /legal guardian)

Emergency Contact Phone Number (Land Line and/or Cell): \_\_\_\_\_

Relationship to Child/ren: \_\_\_\_\_

## Permission Form

I hereby give permission for my child/ren \_\_\_\_\_  
(Please list every child's name)

to walk to other parish buildings during the course of his/her/their religious education classes. I understand that my child/ren will be accompanied by a religious education volunteer during these outings.

\_\_\_\_\_  
(Parent Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Parent's Printed Name)

## Publicity Release

Pursuant to law, St. Joseph's Church will not release any personally identifiable information without prior written consent from you as parent or guardian. Personally identifiable information includes student names, photo or image, residential addresses, e-mail address, and phone numbers.

### Check one of the following choices:

I/We GRANT permission for a photo/image that includes our child(ren) without any other personal identifiers (no name, no age or grade, no address, just a member of St. Joseph's Church, Swedesboro) to be published on St. Joseph's Church and/or The Camden Diocese public Internet site, in publications of St. Joseph Church and/or The Camden Diocese, and/or in other media that may publicize St. Joseph's Church events. **(photo only option, no name)**

I/We GRANT permission for a photo/image that includes our child(ren) and his/their name(s) (no age or grade, no address, just name and a member of St. Joseph's Church, Swedesboro) to be published on St. Joseph's Church and/or The Camden Diocese public Internet site, in publications of St. Joseph Church and/or The Camden Diocese, and/or in other media that may publicize St. Joseph's Church events. **(photo and name, age, possibly other information)**

I/We DO NOT GRANT permission for a photo/image that includes our child(ren) to be published on St. Joseph's Church and/or The Camden Diocese public Internet site, in publications of St. Joseph Church and/or The Camden Diocese, and/or in other media that may publicize St. Joseph's Church events. **(no photo)**

Parent Signature: \_\_\_\_\_

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