

For Office Use

Family Name: _____

School Year: _____

Fee: _____ Check #: _____

Parish Religious Education Program Registration Form
Saint Paul Roman Catholic Church

Complete Form. Print clearly. For first time registrations, please bring an original and one copy of each child's Baptismal Certificate.

Child's Full Name (First, Middle, & Last)	Sex M/F	Date of Birth	Grade Level	Name of Day School	Baptism Date & Parish	1 st Penance Date	1 st Communion Date

Family Name: _____ Home Phone #: _____

Address: _____
Street City Zip Code Email: _____

Father's Name: _____ Work or Cell Phone #: _____ Religion _____

Mother's Name: _____ Work or Cell Phone #: _____ Religion _____
(MAIDEN)

CUSTODY: Are there any custody/legal issues? yes no (If yes, please provide a complete copy of the latest court order.)

*Name of person responsible for Religious Education if not a Parent/Guardian _____ Relationship _____

*Parent/guardian must provide a signed, dated letter of permission to the DRE which is to be kept on file and updated annually.

Please check the box below if you are in agreement with the statement that follows. .

- I have (will) read the Parent Handbook and agree to the requirements and expectations of the St. Paul's Religious Education Program
- I give permission for my child's picture to appear on the parish name website, bulletin boards, & newspaper articles in relation to events that happen in the parish.
- For First Penance, Holy Communion and Confirmation candidates only: I give permission for my child's name to be printed in the Sacramental booklet and parish bulletin. Please note, that the parish bulletin is also posted on the parish website. .

Signature _____ Date _____ Relationship to Child(ren) _____