



St. Therese of the Child Jesus Parish

2017-2018 Religious Education Student Registration Form

Family Surname (Last Name) _____	Home Phone (____) ____ - _____
Address _____	
City _____ Zip _____	Are you a registered family of Saint Therese Parish? <input type="checkbox"/> Yes <input type="checkbox"/> No

Please fill out the following information as completely as possible to ensure that we have your most up to date contact information.

Parent/Guardian Information

Name: _____ Birth Date: ____/____/____ Relationship: Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Religion: Roman Catholic <input type="checkbox"/> Other _____ Baptized <input type="checkbox"/> First Eucharist <input type="checkbox"/> Confirmation <input type="checkbox"/> Church Married <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Widow <input type="checkbox"/> Employer: _____ Occupation: _____ Work Number: (____) ____ - ____ Ext ____ Cell Phone: (____) ____ - ____ Email: _____@_____._____	Name: _____ Birth Date: ____/____/____ Relationship: Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Religion: Roman Catholic <input type="checkbox"/> Other _____ Baptized <input type="checkbox"/> First Eucharist <input type="checkbox"/> Confirmation <input type="checkbox"/> Church Married <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Widow <input type="checkbox"/> Employer: _____ Occupation: _____ Work Number: (____) ____ - ____ Ext ____ Cell Phone: (____) ____ - ____ Email: _____@_____._____
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Emergency Contact Information

Name: _____
Home: (____) ____ - _____
Cell: (____) ____ - _____
Other: (____) ____ - _____
Relationship to Students:

The above information will be used in the case of an emergency when we are unable to contact the parent/guardian.

For Office Use Only:

Registration Date: ____/____/____

Religious Education Fees:
 1st Child \$70.00
 2nd Child \$60.00
 3rd Child \$50.00
 4th + Child Free

Please note: Students in second grade sacramental preparation are subject to additional fee of \$25.00 each.

Fee Paid in Full: Yes No

Payment Information:
 Check # \$ _____
 Cash \$ _____
 Credit Card \$ _____
 Balance Due \$ _____

Notes:

Student Information	First Name (with surname if Different)	Gender	Birth Date	Grade	School Attending	Check Sacraments Received			Health Concerns/Special Needs/Notes (Allergies, Learning Disabilities, Etc.)
						Baptism	Reconciliation	Eucharist	
1.		M / F	____/____/____						
2.		M / F	____/____/____						
3.		M / F	____/____/____						
4.		M / F	____/____/____						
5.		M / F	____/____/____						

Safe Environment and Picture/Video Release

I acknowledge that I am aware that the diocesan safe environment training is available on the diocesan website (<http://diolc.org/safe-environment/>) for my review. I also hereby grant permission for my child/children named on this form to be photographed and/or videotaped during Faith Formation Activities and events; and for the resulting photographs and/or video footage to be edited, if necessary, and then published (newspaper, church bulletin, church website etc.) for the purpose of promoting the activities of St. Therese Catholic Church.

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** ____/____/____

PLEASE NOTE: If any of your children were baptized outside of this parish, and you have not already supplied the R.E. Office with a copy of each child's baptismal record, you will need to supply a copy for our files.