

Date Received: _____

Paid: CHECK # _____

CASH

EXEMPT

St Louis Church Parish Religious Education REGISTRATION FORM 2017-2018

Child's Complete Name: (Last) _____ (First) _____ (Middle) _____

Child's Date of Birth (Month/Day/Year): _____ 2017-2018 School Attending: _____

2016-2017 Grade: K 1 2 3 4 5 6 7 8

Home Address: _____

City _____ ST _____ Zip _____

Child's Preferred Name: _____

SACRAMENTAL HISTORY

Has your child been **baptized**? YES NO

If Yes, Date? (Month/Year) _____

Where?: (Church) _____ (City) _____ (State) _____

Has your child received **First Penance**? YES NO

If Yes, Date? (Month/Year) _____

Where?: (Church) _____ (City) _____ (State) _____

Has your child received **First Holy Communion**? YES NO

If Yes, Date? (Month/Year) _____

Where?: (Church) _____ (City) _____ (State) _____

NOTE: IF YOUR CHILD IS ENTERING 2ND OR 8TH GRADE ATTACH A COPY OF THE BAPTISMAL CERTIFICATE TO THIS REGISTRATION. REGISTRATION IS NOT CONSIDERED COMPLETE UNTIL DOCUMENTATION IS ATTACHED. If your child was baptized at St Louis Church, you need to do nothing further, we have a copy already.

PARENTAL INFORMATION

Father: Name: _____ Religion: _____

Mobile Phone: _____ Home Phone: _____ Other Phone: _____

Address (if different from above) _____

Email Address: _____ Member of St. Louis Parish: YES NO

Mother: Name: _____ Religion: _____

Mobile Phone: _____ Home Phone: _____ Other Phone: _____

Address (if different from above) _____

Email Address: _____ Member of St. Louis Parish: YES NO

EMERGENCY INFORMATION

Please list a trusted individual who may be contacted in the case of an emergency on Sunday mornings during class time. This individual will be contacted only in the case where a parent cannot be reached.

Name: _____

Mobile Phone: _____ Home Phone: _____ Other Phone: _____

Please list any student health concerns of which staff should be made aware (such as acute allergies to food or medication): _____

In the case of a medical emergency: Preferred Hospital (based on insurance): _____

FEES: 1ST Child \$50, 2 children \$80 per family, 3 or more children \$90 per family (PRE Teachers' Children are FREE) To Volunteer, please call the Church Office at (901)682-6606.