

Religious Education Registration 2021-2022  
**Together in Christ Collaborative of  
 St Ann's and St John's**

I am a member of (please check which Parish)

St Ann's Parish \_\_\_\_\_

St John's Parish \_\_\_\_\_

Are you registered at your Parish?

Yes \_\_\_\_\_

No \_\_\_\_\_

**Registration Fee: \$75.00** first child

**\$25.00** each additional child

**FAMILY INFORMATION**

<b>Family Last Name:</b>			<b>Date:</b>	
Father's Name:			Father's Cell / Guardian cell:	
Mother's Name:			Mother's Cell/ Guardian cell:	
Guardian Name:			Email Address:	
Home Phone:			<b>Emergency Contact:</b>	
Home Address:			Emergency Phone:	
City, Zip			Both Parents Catholic?	Yes / No

**STUDENT #1 INFORMATION**

<b>Child Name</b>				
Gender:	Male / Female		<b>Sacrament Details</b>	Check & Date All Below
Birth Date:			<input type="checkbox"/> Baptism date and location:	
Sports child pays			<input type="checkbox"/> Eucharist:	
Talents: music,dance			<input type="checkbox"/> Penance:	
Other talents				

**Special Needs** (Medical, Learning Disabilities, Physical Disabilities, etc):

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### STUDENT #2 INFORMATION

<b>Child Name</b>			
Gender:	Male / Female	<b>Sacrament Details</b>	Check & Date All Below
Birth Date:		<input type="checkbox"/> Baptism:	
Grade:		<input type="checkbox"/> Eucharist:	
Sports child pays		<input type="checkbox"/> Penance:	
Talents: music,dance			

**Special Needs** (Medical, Learning Disabilities, Physical Disabilities, etc):


### STUDENT #3 INFORMATION

Gender:	Male / Female	<b>Sacrament Details</b>	Check & Date All Below
Birth Date:		<input type="checkbox"/> Baptism:	
Grade:		<input type="checkbox"/> Eucharist:	
Sports child pays:		<input type="checkbox"/> Penance:	
Talents: music,dance:			

**Special Needs** (Medical, Learning Disabilities, Physical Disabilities, etc):


### STUDENT #4 INFORMATION

<b>Child Name</b>			
Gender:	Male / Female	<b>Sacrament Details</b>	Check & Date All Below
Birth Date:		<input type="checkbox"/> Baptism:	
Grade:		<input type="checkbox"/> Eucharist:	
Sports child pays:		<input type="checkbox"/> Penance:	
Talents: music,dance			

**Special Needs** (Medical, Learning Disabilities, Physical Disabilities, etc):

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**STUDENT #5 INFORMATION**

<b>Child Name</b>			
Gender:	Male / Female	<b>Sacrament Details</b>	Check & Date All Below
Birth Date:		<input type="checkbox"/> Baptism:	
Grade:		<input type="checkbox"/> Eucharist:	
Sports child pays:		<input type="checkbox"/> Penance:	
Talents: music,dance			

**Special Needs** (Medical, Learning Disabilities, Physical Disabilities, etc):

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**Is there anything else you would like to tell us?**

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

<b>Tuition DUE: \$</b>	<b>Tuition PAID: \$</b>	<b>Signature:</b>
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