

Fourteen Holy Helpers Religious Education Registration 2018-2019

Family Name : _____ Parish: _____ Telephone #: _____ Cell #: _____
 Address: _____ Zip Code: _____ Email Address: _____
 Mother's Name (Maiden) _____ Father's Name _____

\$50.00 per child. A late fee of \$25.00 per family will be charged after July 1st. Sacramental fees will assessed in the fall.

Are there any custody arrangements we need to be aware of? _____ If, yes, please attach a copy of pertinent documents.

Where did your child(ren) attend Religious Education/Catholic School last? _____

Child's First Name	Last Name if other than Family Name	Birth Date	Rel Ed Grade	School Attending	Sacraments Received	Church and Date	Special Needs (learning, medical, Allergies, etc)
						this fall	
					Baptism: Reconciliation: Eucharist:		
					Baptism: Reconciliation: Eucharist:		
					Baptism: Reconciliation: Eucharist:		
					Baptism: Reconciliation: Eucharist:		

Emergency contact (during religious education hours):

Name: _____ Relationship: _____

Phone #: _____ Cell phone: _____

Please call me; I am interested in volunteering as a _____ catechist _____ Catechist Asst _____ Office Aide _____ Special Events _____

All Students registering for the first time in our program MUST include a copy of their baptismal certificate if not baptized at Fourteen Holy

Helpers.

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Office Use:

Payment: \$ _____ cash \$ _____ check # _____

Initial: _____ Date: _____