

St. Vincent Pallotti Religious Education
REGISTRATION FORM FOR A CHILD IN PAROCHIAL SCHOOL
Seeking Sacraments only!

Communion/Reconciliation Preparation: Fee = \$35.00 *(covers all materials and retreats)*
 Confirmation Preparation: Fee = \$35.00 *(covers all materials and retreats)*

Family Last Name: _____

Address: _____

Home Phone: () _____ Street City State Zip
 Cell Phone: () _____

E-Mail Address: _____

Father: _____ Work Phone: _____ Religion: _____

Mother: _____ Work Phone: _____ Religion: _____

Mother's Maiden Name: _____ Registered and attending _____
Name of Parish

Emergency Contact: _____ Phone: _____ Cell Phone: _____

Relationship to Children: _____

Please list all children registering for sacraments in the Religious Education Program. Please check / the appropriate box.

Child's Name First & Last	Birth Date M/D/Y	Grade in Sept.	Parochial School Attending	Seeking 1 st Communion	Seeking Confirmation
1.	/ /				
2.	/ /				
3.	/ /				

Are there any special challenges or considerations (such as reading difficulties, memorizing, ADD, Asthma, Epilepsy, food allergies, medication, emotional difficulties, family problems, etc.) that we should be aware of? **(All information is kept private and confidential) This information can be of valuable assistance in helping the teacher to understand and help your child as much as possible.**

Please sign and date here if you **DO NOT** want a photograph posted of your child in our parish media (bulletin, poster, etc.) Name: _____ Date: _____

Please Indicate How You Can Share Time/Talents In The Religious Education Program. We Strongly Encourage You To Volunteer Your Time During The School Year:

Catechist: _____ Catechist Aide: _____ Substitute: _____ Ed. Commission: _____ Bake Goods: _____

Record of Payment

DATE: _____ AMOUNT PAID: _____ CASH: or CHECK #: _____ REC # _____ BALANCE: _____

Sacramental Certificates must be provided before the start of the Rel. Ed. school yr.