

RELIGIOUS EDUCATION REGISTRATION FORM

SAINT MOTHER TERESA OF KOLKATA PARISH

IMPORTANT—IF YOU ARE REGISTERING YOUR CHILD IN OUR PROGRAM, **THEY MUST ATTEND MASS ON A REGULAR BASIS.** SUNDAY SCHOOL IS ONLY A COMPLIMENT TO THE MOST IMPORTANT ELEMENT, WHICH IS THE CELEBRATION OF THE EUCHARIST.

PRINT CLEARLY

Child's Name: _____ Grade: _____

Date of Birth: YYYY/MM/DD _____ Church of Baptism: _____

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PARENT/GUARDIAN INFORMATION:

NAME: _____

TELEPHONE: _____

EMAIL: _____

IN THE EVENT A PARENT/GUARDIAN CANNOT BE CONTACTED IN AN EMERGENCY, PLEASE PROVIDE A NAME AND CONTACT INFORMATION OF ANOTHER PERSON TO BE CONTACTED.

NAME: _____ RELATIONSHIP TO CHILD _____

TELEPHONE: _____

PLEASE INDICATE ANY INFORMATION CONCERNING YOUR CHILD'S HEALTH THAT WE SHOULD BE AWARE OF—ALLERGIES, MEDICAL CONDITIONS, ETC.

THE SUCCESS OF ANY PROGRAM DEPENDS UPON PARENTAL ASSISTANCE. PLEASE INDICATE ANY AREAS WHERE YOU WOULD BE WILLING TO HELP WITH OUR PROGRAM:

CATECHIST TELEPHONE COMMITTEE

SUBSTITUTE RELIGIOUS EDUCATION COMMITTEE

ASSISTANT MUSIC/DRAMA

ASSIST WITH ONE EVENT

REGISTRATION FEE: \$15.00 PER CHILD.

TOTAL PAID: _____

WE WELCOME YOU AND YOUR CHILDREN TO OUR PROGRAM. THANK YOU FOR YOUR SUPPORT AND ASSISTANCE!

Parent Signature