

# RELIGIOUS EDUCATION 2009/2010

## New Family Registration Form

### REQUIREMENTS FOR REGISTRATION

- Registered, active member of Espiritu Santo Catholic Church
- All fees due at time of registration
- Registration Tuition: \$75.00

### Family Information

Family Last Name: \_\_\_\_\_ Envelope #: \_\_\_\_\_

Legal Guardian (If other than parents): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Unlisted?  Yes  No

E-mail Address: \_\_\_\_\_

### Parent (or legal guardian) Information

Father's (Stepfather) Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Work phone: \_\_\_\_\_ x \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's (Stepfather) Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Work phone: \_\_\_\_\_ x \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Emergency Contacts:

*In the event of an emergency, and we are unable to reach you, we will contact the following:*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

**--OVER--**

### FOR OFFICE USE ONLY

Registration Fees: Date \_\_\_/\_\_\_/\_\_\_ Amount Paid \_\_\_\_\_ Cash \_\_\_ Check # \_\_\_\_\_

## RELIGIOUS EDUCATION CLASS SCHEDULE

DAY OF WEEK	GRADES	TIME
Sunday	Kdg thru 5 <sup>th</sup>	9:45 am – 11:00 am
Monday	Kdg thru 8 <sup>th</sup>	6:15 pm – 7:30 pm
Tuesday	Kdg thru 8 <sup>th</sup>	6:15 pm – 7:30 pm

## SESSION CHOICE

STUDENT NAME	Requested Grade For Religious Ed (K, 1, 2, 3, etc.)	1 <sup>st</sup> CHOICE (S, M, or T)	2 <sup>nd</sup> CHOICE (S, M, or T)

## PARENT INVOLVEMENT

*If you would like to volunteer, please check those areas in which you can assist.*

THE FOLLOWING REQUIRE A **WEEKLY** COMMITMENT:

Catechist   
  Assistant   
  Office Clerk   
  Front Desk   
  Hall Monitor

THE FOLLOWING ARE ON AN **AS NEED** BASIS:

Substitute Catechist   
  Substitute Assistant

**Parent/Guardian Consent:** I consent to my child/children being registered in the Espiritu Santo Religious Education Program. I am aware that they will be instructed in Roman Catholic Doctrine and Traditions. As the person primarily responsible for my child's/children's faith formation, I agree to reinforce those teachings and practices by being registered in the parish, attending Mass weekly and using envelopes, and giving of my time talent and treasure to the parish. I also take responsibility for their attendance, and to instruct my child/children regarding proper behavior while attending Religious Education classes.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# RELIGIOUS EDUCATION 2009/2010

## New Student Information

### STUDENT 1

Student Name: \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex: M or F Grade in School: \_\_\_\_\_

This student lives with: \_\_\_\_ Mother and Father \_\_\_\_ Mother Only \_\_\_\_ Father Only  
\_\_\_\_ Mother and Stepfather \_\_\_\_ Father and Stepmother \_\_\_\_ Grandparent(s)  
\_\_\_\_ Other (Specify): \_\_\_\_\_

Last grade completed in Religious Education: \_\_\_\_\_ Where: \_\_\_\_\_

Are there any special needs your child has – such as medical conditions, learning needs, allergies, family situations, etc. – that we should be aware of?

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Baptism:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_ Catholic?  Yes  No  
First Communion:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_  
Confirmation:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_

### STUDENT 2

Student Name: \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex: M or F Grade in School: \_\_\_\_\_

This student lives with: \_\_\_\_ Mother and Father \_\_\_\_ Mother Only \_\_\_\_ Father Only  
\_\_\_\_ Mother and Stepfather \_\_\_\_ Father and Stepmother \_\_\_\_ Grandparent(s)  
\_\_\_\_ Other (Specify): \_\_\_\_\_

Last grade completed in Religious Education: \_\_\_\_\_ Where: \_\_\_\_\_

Are there any special needs your child has – such as medical conditions, learning needs, allergies, family situations, etc. – that we should be aware of?

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Baptism:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_ Catholic?  Yes  No  
First Communion:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_  
Confirmation:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_

# RELIGIOUS EDUCATION 2009/2010

## New Student Information

### STUDENT 3

Student Name: \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex: M or F Grade in School: \_\_\_\_\_

This student lives with: \_\_\_\_ Mother and Father \_\_\_\_ Mother Only \_\_\_\_ Father Only  
\_\_\_\_ Mother and Stepfather \_\_\_\_ Father and Stepmother \_\_\_\_ Grandparent(s)  
\_\_\_\_ Other (Specify): \_\_\_\_\_

Last grade completed in Religious Education: \_\_\_\_\_ Where: \_\_\_\_\_

Are there any special needs your child has – such as medical conditions, learning needs, allergies, family situations, etc. – that we should be aware of?

\_\_\_\_\_  
\_\_\_\_\_

Baptism:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_ Catholic?  Yes  No  
First Communion:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_  
Confirmation:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_

### STUDENT 4

Student Name: \_\_\_\_\_  
(Last) (First) (Middle)

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex: M or F Grade in School: \_\_\_\_\_

This student lives with: \_\_\_\_ Mother and Father \_\_\_\_ Mother Only \_\_\_\_ Father Only  
\_\_\_\_ Mother and Stepfather \_\_\_\_ Father and Stepmother \_\_\_\_ Grandparent(s)  
\_\_\_\_ Other (Specify): \_\_\_\_\_

Last grade completed in Religious Education: \_\_\_\_\_ Where: \_\_\_\_\_

Are there any special needs your child has – such as medical conditions, learning needs, allergies, family situations, etc. – that we should be aware of?

\_\_\_\_\_  
\_\_\_\_\_

Baptism:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_ Catholic?  Yes  No  
First Communion:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_  
Confirmation:  Yes  No Year: \_\_\_\_\_ Where: \_\_\_\_\_