

# Sts. Cyril & Methodius Catholic Church Shiner, TX

## “New Student” Religious Education Registration Form

**Please Send a Copy of Baptismal Certificate (must have)  
& a copy of First Holy Communion Certificate If applicable.**

**Family Last Name:** \_\_\_\_\_

Father's Name: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone No. : \_\_\_\_\_

Father's Work No.: \_\_\_\_\_ Father's Cell No.: \_\_\_\_\_

Mother's Work No.: \_\_\_\_\_ Mother's Cell No.: \_\_\_\_\_

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Student Attending Religious Education:

**Child's Name:** \_\_\_\_\_

Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name of Hospital: \_\_\_\_\_

City, State: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

Church: \_\_\_\_\_

City, State \_\_\_\_\_

Date of 1<sup>st</sup> Holy Communion: \_\_\_\_\_

Church: \_\_\_\_\_

City, State: \_\_\_\_\_

Date of Confirmation: \_\_\_\_\_

Church: \_\_\_\_\_

City, State: \_\_\_\_\_

**Registration Fee: \$25.00 – 1 student, \$50.00 – 2 students, \$60.00 – 3 or more students**