

IMMACULATE HEART OF MARY CHURCH
Registration Form
Freshman Scripture Study
List Full Name of Child(ren) Attending Scripture Study

1.		
(Last)	(First)	(Middle)

2.		
(Last)	(First)	(Middle)

FAMILY INFORMATION:

Father's Name:		
Address:	City:	Zip:
Home Phone:	Cell Phone:	
Email:		
Marital Status*:	Religion:	
<i>(*1st Marriage, Remarried, Divorced)</i>	Occupation:	
Are you a registered member of Immaculate Heart of Mary Parish?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		

FAMILY INFORMATION:

Mother's Name:	Maiden Name:	
Address:	City:	Zip:
Home Phone:	Cell Phone:	
Email:		
Marital Status*:	Religion:	
<i>(*1st Marriage, Remarried, Divorced)</i>	Occupation:	
Are you a registered member of Immaculate Heart of Mary Parish?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		

STUDENT INFORMATION:

Name of Child	Date & Place of Birth (City & State)	School & Grade

ADDITIONAL STUDENT INFORMATION:

Please indicate any other information we should know about your child(ren): (i.e. allergies, special needs, etc.)

PERMISSION TO USE PHOTOS

As parent/guardian of this child, I give permission to use my child's photograph with Religious Education class activities in publications, such as the parish bulletin, parish internet website, local or Diocesan newspaper.

YES _____ NO _____

FEES: First Child - \$40 Two Children - \$60

Signed:	Date:
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