

ST. JOSEPH CHURCH - RELIGIOUS EDUCATION FORM 2019/2020

Parent's Last Name _____

Address _____ City _____ Zip _____

Phones – Home _____ Cell _____

Parent e-mail _____

Father's Name _____ Religion _____

Mother's Name _____ Religion _____

Mother's Maiden Name _____

Stepparent/Guardian's Name _____

Registered in parish (Circle One) Yes No

In the event of an emergency, who should be contacted? _____

CHILDREN BEING REGISTERED (more spaces on back of page)

NOTE: Under "Name" list child's full given name.

1. Name _____ Male ___ Female ___ Date of Birth ___/___/___

Nick name _____

School grade/CCD grade for 2019/2020 _____ Public School Attending _____

Please mark the line for the sacraments your child HAS received.

___Baptism ___Reconciliation ___ First Holy Communion ___Confirmation

Special needs--Learning difficulties, allergies, physical or health needs, family circumstances:

2. Name _____ Male ___ Female ___ Date of Birth ___/___/___

Nick name _____

School grade/CCD grade for 2019/2020 _____ Public School Attending _____

Please mark the line for the sacraments your child HAS received on the next page.

Baptism (at St. Joseph? Y N) Reconciliation First Holy Communion
Confirmation

Special needs--Learning difficulties, allergies, physical or health needs, family circumstances

3. Name _____ Male Female Date of Birth ___/___/___

Nick name _____

School grade/CCD grade for 2019/2020 _____ Public School Attending _____

Please mark the line for the sacraments your child HAS received.

Baptism (at St. Joseph? Y N) Reconciliation First Holy Communion
Confirmation

Special needs--Learning difficulties, allergies, physical or health needs, family circumstances:

4. Name _____ Male Female Date of Birth ___/___/___

Nick name _____

School grade/CCD grade for 2019/2020 _____ Public School Attending _____

Please mark the line for the sacraments your child HAS received.

Baptism (at St. Joseph? Y N) Reconciliation First Holy Communion Confirmation

Special needs--Learning difficulties, allergies, physical or health needs, family circumstances:

I understand that pictures may be taken in the classroom or at other church events. St. Joseph Catholic Church has my permission to put my child's picture on the church website or sent to the Catholic Moment, the diocesan bi-weekly newspaper. Please circle: YES NO

VOLUNTEER INFORMATION - CAN YOU HELP?

I would be interested in being a substitute catechist

My child (4th gr. & older) would be interested in being a server at Mass

Parent would be interested in (check as many as interested) name _____

Minister of the Holy Eucharist Greeter Lector Cantor Usher