

2017 - 2018 Religious Education Registration Form

**ST. MARY - ST. CATHERINE OF SIENA  
EARLY REGISTRATION FORM  
2017-2018 RELIGIOUS EDUCATION**



Please complete a registration form for each child in Grades K-8 and return to the Parish Office, 46 Winthrop Street. Early Registration Fees (before Aug. 15): \$75 for one child, and \$30 for each additional child. Financial Scholarships are available. Please call 617-242-4664 or email [reled@stmarystcatherine.org](mailto:reled@stmarystcatherine.org) if you have any questions.

(Please Print legibly. Front and Back)

Name \_\_\_\_\_ Grade \_\_\_\_\_

Home Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ School Attending \_\_\_\_\_

Mother's (Guardian's) Name \_\_\_\_\_

Cell Phone Number \_\_\_\_\_ Denomination \_\_\_\_\_

Email Address \_\_\_\_\_

Father's (Guardian's) Name \_\_\_\_\_

Cell Phone Number \_\_\_\_\_ Denomination \_\_\_\_\_

Email Address \_\_\_\_\_

Parent/Guardian willing to help in classroom? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, in what capacity \_\_\_\_\_

**SACRAMENTS RECEIVED** (please list: date, parish, and city/town)

Baptism \_\_\_\_\_

(Copy of baptismal certificate needed if not baptized in our parish.)

First Communion \_\_\_\_\_

(please indicate if you would like your child to receive Baptism and/or First Holy Communion this year)

(turn over)

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**If your child has special needs, please let us know and we will work to make the necessary provisions for him/her:**

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**Can child receive snacks in class? What kind?**

**Known allergies:**

**My child can walk home from class alone. Yes\_\_\_\_\_ No\_\_\_\_\_**

**Regular Commitments During the Year: (e.g. hockey practices, ski weekends, etc.)**

(please list season and expected number of weeks affecting classes)

**Emergency Contact Name**

**Emergency Contact Telephone**

**Signature of Parent/Guardian**

**Date**