

**Holy Family Parish
Religious Education Registration
2009-2010**

Student's Name _____ **Grade** _____

Birth Date _____ **Age** _____

Address _____

City _____ **Zip Code** _____

Phone Number _____

E Mail Address _____

Father's Name _____ **Phone Number** _____

Mother's Name _____ **Phone Number** _____

Are you a registered member of Holy Family? Yes _____ **No** _____

Is a copy of the student's baptismal certificate on file? Yes _____ **No** _____

Special information which maybe helpful in teaching your child (i.e. hearing, or learning disabilities, poor vision, allergies, etc.)

Sacraments Received

Baptism _____

First Reconciliation _____

First Communion _____

Confirmation _____

Registration Fees

\$45.00-1 child

\$90.00-2 children

\$100.00-3 or more children

\$75.00-per child for non members

Cash Amount _____ **Check Number and Amount** _____