

SAINT PIUS X CATHOLIC PARISH
RELIGIOUS EDUCATION
REGISTRATION FORM 2016-2017

STUDENT INFORMATION

Please Print--

CHILD'S NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

SCHOOL STUDENT ATTENDS _____ GRADE _____

DATE OF BIRTH _____ DATE OF BAPTISM _____

CHURCH OF BAPTISM _____

CITY _____ STATE _____

SACRAMENTS RECEIVED-- BAPTISM _____ RECONCILIATION _____

EUCCHARIST _____ CONFIRMATION _____

PARENT / GUARDIAN INFORMATION

Please Print--

MOTHER'S NAME _____

ADDRESS _____ CITY _____ STATE _____

HOME PHONE _____ CELL PHONE _____

EMAIL ADDRESS _____

FATHER'S NAME _____

ADDRESS _____ CITY _____ STATE _____

HOME PHONE _____ CELL PHONE _____

EMAIL ADDRESS _____

CHILD LIVES WITH _____ BOTH PARENTS _____ MOTHER _____ FATHER

IF OTHER, PLEASE SPECIFY _____

PLEASE TURN TO BACK PAGE

EMERGENCY INFORMATION

In the event of an emergency, if you are unable to be reached, please list someone else that we may contact.

NAME _____ RELATIONSHIP _____

PHONE _____

If there is an emergency situation, do you give us permission to seek medical attention? (Please circle one)

YES NO PARENT / GUARDIAN SIGNATURE _____

OTHER INFORMATION

Please list any information (custody arrangements, learning disorders, such as ADD, any speech, hearing, or language problems; health or allergy problems, physical impediments that will help us to be more effective in working with your child.

This information will only be used by the teacher and pastor to benefit your child.

PICK UP AUTHORIZATON
<p>If your child is in the 4th grade or lower, it is mandatory that someone come into the classroom to pick up your child. If a sibling will pick up your child, they must be in the 5th grade or higher.</p> <p>Please list all who have permission to pick up your child.</p> <p>_____</p> <p>_____</p>

PARENT / GUARDIAN SIGNATURE _____