

Assigned to _____

(Office use only)

ST. ELIZABETH ANN SETON RELIGIOUS EDUCATION REGISTRATION FORM 2010-2011 SCHOOL TERM

STUDENT INFORMATION

Is your child receiving Special Education Services in the Public School Setting:
Yes ___ No ___ (If Yes, describe below)

NAME: _____
Last First Middle

Date of Birth: _____
Age as of 9/1/10: _____
Grade Entering: _____
Male/Female: _____

SACRAMENTS RECEIVED:

Baptismal Date: _____
Reconciliation Date: _____
First Communion Date: _____
Confirmation Date: _____

FAMILY INFORMATION:

Special custodial arrangements: _____

Father: _____
Last First

Mother: _____
Last First Maiden

Street Address: _____

City: _____ Zip: _____ Home Phone: _____

Father's Work # _____ Mother's Work # _____

Child lives with _____ Family E-Mail _____

ARE YOU CURRENTLY REGISTERED IN ST. ELIZABETH ANN SETON PARISH: _____

IF NOT, WHAT PARISH DO YOU ATTEND? _____

HAS YOUR CURRENT PASTOR BEEN INFORMED AND AGREED THAT YOUR CHILD WILL ATTEND ST. ELIZABETH ANN SETON RELIGIOUS EDUCATION CLASSES: _____

GRADES ATTENDED IN ST. ELIZABETH ANN SETON RELIGIOUS EDUCATION PROGRAM _____

IF NEW TO ST. ELIZABETH ANN SETON RELIGIOUS EDUCATION PROGRAM:

PRIOR PARISH ATTENDED: _____ GRADES ATTENDED: _____

CATHOLIC SCHOOL ATTENDED: _____ GRADES ATTENDED: _____

PUBLIC SCHOOL CURRENTLY ATTENDING: _____

OVER (Please complete the reverse side)

DESCRIPTION OF SPECIAL SERVICES: _____

SPECIAL CUSTODIAL ARRANGEMENTS: _____

SPECIAL MEDICAL CONDITIONS/CONCERNS/MEDICATIONS: _____

PARENT VOLUNTEER OPPORTUNITIES

VOLUNTEER NAME(S) 1: _____ 2: _____

FATHER

MOTHER

1	2	SELECTIONS	1	2	SELECTIONS
		CATECHIST (GRADE _____)			ASSIST WITH 2 ND GRADE RECONCILIATION RECEPTION (1 ST GRADE PARENTS)
		SUBSTITUTE CATECHIST (GRADE _____)			ASSIST WITH FIRST COMMUNION ICE CREAM SOCIAL (1 ST GRADE PARENTS)
		OFFICE WORK/PROJECT SUPPORT			PROVIDE REFRESHMENTS
		ATTENDANCE PHONE CALLS			ASSIST SPECIAL NEEDS STUDENTS
		ASSIST WITH TRAFFIC CONTROL			SPEAK TO STUDENTS ON TOPICS OF INTEREST (PRAYER, SAINTS, MARY, ROSARY, ETC.)

OFFICE USE ONLY

RELIGIOUS EDUCATION BOOK AND MATERIAL FEE: \$25 PER CHILD (\$65 MAX PER FAMILY)

Date Material Fee Paid: _____ Amount: _____ Check#: _____ Cash: _____