

**BLESSED SACRAMENT CATHOLIC CHURCH
RELIGIOUS EDUCATION
REGISTRATION FORM FOR NEW STUDENTS**

Fee: \$ 30 per Student (cover book charges)

Family's Last Name: _____

Child's Name: _____ **Age:** _____

Child's Date of Birth: _____ **Grade:** _____

Child's Place of Birth: _____

Sacraments child has received: _____

Date of Baptism: _____

Church of Baptism: _____

Location of Church of Baptism: _____

Father's First Name: _____

Mother's First Name and Maiden Name: _____

Home Address: _____

(including City and Zip Code) _____

Home Phone Number: _____

Work Phone Number: _____

Cell Phone Number: _____

E-mail Address: _____

____ Please check here if you would like to discuss any special needs your child might have or accommodations your child might need to be successful in the religious education classroom. Please be assured that all children, regardless of circumstances or abilities, will be accommodated.

*Please return this completed form w/ payment to the registration table
in the Social Hall after all the Masses: 24-25 April or 1-2 May.*