

Family Name _____

Religious Education Registration
St. Richard Catholic Church

Parent or Guardian #1 _____ Marital status _____

Parent or Guardian #2 _____ Maiden Name _____

Address _____

Home phone _____ cell phone _____

Parent/Guardian #1 phone _____ alternate phone _____

Parent Guardian #2 phone _____ alternate phone _____

Family email address _____

Parent/Guardian #1 address if different than child's

Parent/Guardian #2 address if different than child's

Additional family information (i.e. step-parent information, deceased parent, custody issues, etc.)

Please name an adult that does not live with the child. Every attempt will be made to contact the parents/guardians first.

Emergency Contact _____ Relationship _____

Phone _____ alternate phone _____

Family Name _____

Other than the parents/guardians listed above, who else may transport child/children?

Name _____ Phone _____

Name _____ Phone _____

CHILD #1

Name _____ Date of Birth _____

M or F School _____ Grade in fall _____

Allergies: _____ None _____ Yes: _____

Medical conditions: _____ None _____ Yes: _____

Medications: _____ None _____ Yes: _____

Baptism: () on record Date _____ Parish _____

First Reconciliation: () on record Date _____ Parish _____

First Eucharist: () on record Date _____ Parish _____

Special needs registration required: _____ Yes _____ completed _____ No

CHILD #2

Name _____ Date of Birth _____

M or F School _____ Grade in fall _____

Allergies: _____ None _____ Yes: _____

Medical conditions: _____ None _____ Yes: _____

Medications: _____ None _____ Yes: _____

Baptism: () on record Date _____ Parish _____

First Reconciliation: () on record Date _____ Parish _____

First Eucharist: () on record Date _____ Parish _____

Special needs registration required: _____ Yes _____ completed _____ No

Family Name _____

CHILD #3	
Name _____	Date of Birth _____
M or F School _____	Grade in fall _____
Allergies: _____ None _____ Yes: _____	
Medical conditions: _____ None _____ Yes: _____	
Medications: _____ None _____ Yes: _____	
Baptism: () on record Date _____ Parish _____	
First Reconciliation: () on record Date _____ Parish _____	
First Eucharist: () on record Date _____ Parish _____	
Special needs registration required: _____ Yes _____ completed _____ No	

As a parent/guardian of a child/children in Religious Education Program you are expected to commit to the following:

1. I understand that the Holy Mass is the central form of prayer and worship for Roman Catholics. I understand my responsibility to take my child to mass on Sundays and Holy days of obligation.
2. I will make sure that my child makes up any missed class assignments.
3. I understand that proper conduct and respect is expected of each student in class and will review with my child/children appropriate behavior during participation in all religious education activities.

On occasion videotape, audio tape, and photographs are taken of the children during parish and diocesan sponsored activities. These are used in, but not limited to use in, newsletters, websites, event promotions, advertisements, and the parish website.

_____ I consent to the use of such materials in which my child/children appear.

_____ I DO NOT consent to the use of such materials in which my child/children appear.

In the event that the undersigned parent or guardian cannot be contacted, permission is given to provide prudent medical care and/or transportation to the nearest hospital. The undersigned hereby for said minor(s), all heirs, Executors, administrators and assigns, waives and releases any and all rights and claims for damages against St. Richard Church and its agents for any and all injuries suffered during religious education. I hereby assume all risk of injury to person and property.

Signature of Parent/Guardian _____

Printed Name _____ Date _____